Congratulations to Highland Hospital on winning 2nd place for the Pink Glove video!
Thank you for choosing the Breast Cancer Coalition as your charitable donation.

On a cold, blustery, rainy evening in late October, a crowd gathered at the Coalition office to celebrate all whose lives have been forever altered after hearing the words, “You are not alone.”

Braving the rain with colorful umbrellas and candles aglow for a walk of celebration and remembrance.
Having survived a season filled with hustle and bustle of all kinds, many of us are looking forward to a year filled to the brim with ways to make a difference. As this newsletter heads to press, advocates throughout the state and nation are toughening up for the season ahead. Front and center at the Coalition is our own advocacy effort.

**Just what is advocacy?**

**What does it mean to be an advocate?**

**ADVOCATE:** (1) one that defends or maintains a cause or proposal; (2) to uphold or defend as valid or right.

**ADVOCACY:** the act or process of advocating or supporting a cause or proposal

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Advocacy—whether on a personal or political level—is about making a difference in your own life or in the lives of those around you. Often times breast cancer survivors, family members and friends care about what happens to the breast cancer survivors who will follow. They are interested in making a difference for all women, men and families impacted by this diagnosis. For those who heed the call, opportunities to participate as a breast cancer advocate within our own community abound, both in number and character.

Are you interested in legislative issues? Is your bend more towards causes or proposals; (1) one that defends or maintains a cause or proposal; (2) to uphold or defend as valid or right.

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As you take stock of the year ahead, there are many opportunities to become involved with the Coalition. Currently, committees looking for participants include Advocacy, Research, ARTrageous Affair, Pink Ribbon Run & Walk, Teed-off at Breast Cancer Golf Tournament and, finally, Outreach. Outreach offers individuals or pairs of friends the opportunity to represent us at Health Fairs, Festivals, and in school programs.

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For some, a diagnosis of breast cancer seems to come completely out of the blue. For others, it is the culmination of a long period of uncertainty. Last year, Carol Kistner found herself to be an unwilling member of the latter group. From the time she was in her early thirties, there were concerns about breast lumps. As a result, she underwent ultrasounds and needle biopsies from at a younger age than most. As she entered her forties, yearly mammograms and ultrasounds became a matter of routine. At one point, a lump was surgically removed, and was determined to be benign. By the winter of 2010, she had grown accustomed to questionable mammograms.

After a regular screening mammogram and ultrasound in February of 2010, Carol was called back to the imaging center for a more complete work-up. It was a familiar scenario for her. But a new finding made her feel somewhat apprehensive; calcifications in her left breast had been detected. While califications are a common finding on mammograms, and most often benign, Carol’s radiologist felt that in her case, there was need for follow-up. The area showing calcifications was biopsied as well as two areas that the ultrasound had shown to be suspect. It was a long day for Carol. When the report came back, the news was life-changing: while one breast was cancer free, the other was found to be cancerous.

Carol determinedly moved forward. She consulted with a surgeon, and a lumpectomy was scheduled. In Carol’s case, this therapy—such as a hormonal therapy used in certain breast cancers, was a feeling that the worst was behind her, and one week later, Carol went on a much needed vacation. Tamoxifen, a hormonal therapy used in certain breast cancers, was to the next phase of the journey; radiation.

In Carol’s case, this therapy consisted of a type known as mammositemic radiation—a kind of internal radiation, also known as partial breast radiation. Tiny catheters deliver small radioactive seeds that are left in place just long enough to deliver the required dose of radiation. The space-age quality of this therapy was impressive. Still, Carol felt good to leave that phase of treatment behind her and move on to the next step; she consulted with a medical oncologist.

An Oncotype-DX test had been conducted on her tumor. A laboratory analysis for certain types of breast tumors, Oncotype-DX helps doctors determine how likely it is that the cancer will recur, and how likely it is that chemotherapy will be beneficial. In Carol’s case, it was decided that chemotherapy would be in her treatment plan, and four chemo sessions over the course of three months were scheduled. Carol experienced a few unpleasant side effects from that, as some do, but pressed onward, resolved to show strength as she made her way through. “Everyone I knew got through these three phases with grace (surgery, radiation, and chemotherapy) and that’s what I counted on,” Carol recalls. She looked forward to the end of treatment.

Whether in her work as a chaplain or in raising her family, Carol had always found herself absorbed in her role as caregiver. Throughout her diagnosis and treatment, she recalls, “I continued being the caregiver even though I was the one who was struggling.”

The end of chemotherapy brought a sense of relief, to carry me through. And get through it I did.”
**One in Eight...**

What Does It Really Mean?

By Pat Battaglia

The oft-repeated statement that “one in eight women will develop breast cancer in her lifetime” has become an integral part of the pink ribbon zeitgeist. It’s a startling, sobering statistic, but what is its origin, and what does it mean?

The National Cancer Institute (NCI) is an arm of the National Institutes of Health (NIH), which is one of eleven agencies that comprise the United States Department of Health and Human Services. The NCI, among many other things, conducts and supports research into the causes, prevention, diagnosis, and treatment of cancer. Their website, www.cancer.gov, offers a wealth of information, resources and support to cancer patients, their families and caregivers.

Since 1975, the NCI’s Surveillance, Epidemiology, and End Results (SEER) Program has published its annual SEER Cancer Statistics Review. This report of the most recent cancer incidence, mortality, survival, prevalence, and lifetime risk statistics estimates that, based on data from the years 2005 through 2007, 12.2 percent of women born during that time will be diagnosed with breast cancer at some point in their lives. This can be expressed as approximately one in eight women. If it were possible to isolate a group of one hundred women who live until the age of ninety, about twelve of them could be expected to develop breast cancer at some point. On the other hand, eighty-eight of them (or seven in eight) will never face the disease. In comparing the latest figures to statistics from the 1970’s that placed lifetime risk at just under ten percent (close to one in ten), a troubling overall trend is noticed. The purpose of such a large compilation of data is to take a look at the big picture, but the information gained is difficult to apply to individuals.

As with all statistics, these are probabilities based on averages for large groups of people. They point to overall trends and raise some serious questions, but they don’t tell you, me or Aunt Tillie what our individual chances are for being diagnosed with breast cancer. There are many factors that influence personal risk. Some of these considerations, such as a woman’s reproductive history or family history, are known, while others are not completely understood or remain to be discovered. The biggest risk factors are being a woman (although men are also susceptible to breast cancer) and growing older. While risk factors affect the chances of developing breast cancer, they do not cause it.

Undue anxiety about one’s odds of being diagnosed is counterproductive and may even result in diminished quality of life. It helps to be in full charge of the things over which we have control. Taking care of ourselves, body and soul; living life to the fullest; and keeping open lines of communication with our loved ones, friends, and health care providers can carry us from day to day in optimal physical and emotional health. These things also happen to be great risk reduction strategies for a number of potential health concerns.

For those who do, unfortunately, face a breast cancer diagnosis, a compassionate community of survivors can bolster and empower them and their loved ones as they make their way through the uncertainties and fears. The Coalition offers a safe place for those who are new to this life-altering diagnosis to receive the support of others who have walked the same road – and that is a reliable fact.★

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http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2894028/

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC294428/

http://www.cancer.gov/cancerstatistics/factsheet/detection/probability-breast-cancer


★ While we recognize this is a statistical average, there are many factors that can influence individual risk, including family history, genetics, and personal health habits. It is important for women to discuss their personal risk factors with their healthcare providers to determine their own likelihood of developing breast cancer.

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One in Eight continued

The SEER Report also breaks down the risk of developing breast cancer into ten-year age intervals. These calculations take life expectancy rates into account and offer what might be considered to be a more accurate representation of risk. According to the report, a woman’s chance of being diagnosed with breast cancer is as follows:

- from age 20–29...0.06% (about 1 in 1666)
- from age 30–39...0.43% (about 1 in 233)
- from age 40–49...1.45% (about 1 in 69)
- from age 50–59...2.38% (about 1 in 42)
- from age 60–69...3.45% (about 1 in 29)
- from age 70–79...3.74% (about 1 in 27)
- from age 80–89...3.02% (about 1 in 33)
- from age 90–99...2.33% (about 1 in 43)
- from age 100–...1.55% (about 1 in 64)

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Medical Update Notes

from the 2011 National Breast Cancer Coalition Conference

By Rebecca Solomon

Addressing medical updates in this age of cellular research means surveying information emerging from both the genomic level (the most basic molecular level of biology), and conversely, the organic macro-environment in which we live.

In recent years, medical progress has evolved from a focus on new treatments – or “newer and fancier drugs” according to one speaker – to the promise of blood tests for tumor markers, targeted therapies, and biological agents which would replace chemotherapy as we know it.

While promise abounds, so do challenges.

Hearing phrases like “cancer genomics” and “confluence of knowledge,” we stand at the threshold of tremendous new possibilities of understanding how cancer cells develop, as well as why they don’t die like normal cells do. How can oncogenes, which produce cancer cells, be recognized? Better yet, how can they be reprogrammed? What proteins are needed to make a cancer cell? How can they be targeted and obliterated?

Dr. Susan Love, explaining that “tailing” was developed for surgical purposes and it is basically passé, described the many new classifications of breast cancer being studied for their cellular properties. These include such types as basal, luminal A and B, and claudin-low, and Dr. Love stated, “We’ll probably have twenty by the time we’re done.” A more detailed diagnosis promises a more tailored treatment, as well as recognition of and treatment for micrometastases, small deposits of cancer at its earliest spread.

Another concept she described was the “molecular neighborhood.” Because all cancer is genetic (not hereditary), the “microenvironment” that enhances tumor formation is known to include inflammation - stemming from many causes, including lack of...
Lives Touched continued

have breast cancer.” No matter where a person may be in the unfolding of their life story, a diagnosis of breast cancer is an unwelcome intruder. Whether building a life, family, or career— or enjoying the golden years— or at any point along the way, breast cancer can suspend plans and scatter hopes.

Lives Touched: Lives Celebrated is a yearly tradition here at the Coalition. It is an evening set aside to reflect on the journey thus far and to remember those who have walked with us and continue to be by our sides. Breast cancer leaves a wide path of damage, and family, friends, caretakers, and other survivors are affected, even as they form a circle of caring around each person as she or he faces the diagnosis. All were invited to become part of an uplifting evening of quiet celebration.

Beginning with a candlelight walk, participants bundled up against the gloomy weather, some holding umbrellas. All carried candles to light the way. Warm hearts chased away the chill as the group made its way through the rain in honor of all who have undertaken this journey. Spirits were high and the sounds of gentle conversation were occasionally punctuated by joyful laughter as the group completed its circuit around University Avenue to return to the light and warmth of the office. Then began a program of inspirational speakers, music, and the reading of tribute cards that participants had filled out earlier, honoring those who have been affected by breast cancer or who have made a difference in their lives.

Carol Kistner, a Chaplain at Sisters of Mercy Hospital in Buffalo and Melanie Duguid-May, an ordained American Baptist Minister, each spoke in their turn of healing and hope. Both women have histories of breast cancer, and each lent her own unique and heartening perspective to the topics. At intervals between the speakers were the reading of tribute cards, and the reading of tribute cards that participants had filled out earlier, honoring those who have been affected by breast cancer or who have made a difference in their lives.

As the formal events of the evening drew to a close, participants lingered, some sipping warm mulled cider, and the sounds of friendly chatter filled the room as the group slowly accompanied on the keyboard by her equally talented friend, Melissa MacLean. The reading of tribute cards continued.

Friends celebrating at Lives Touched

Lives Touched continued

I long thought to hope was to hope for... hope everything will be ok. Hope for a job to come through. Hope for good weather on a weekend. Hope for a loved one to call. I hoped for. I was always looking beyond the present to the future, to what I wanted to happen or to have—there and then. Slowly I’ve changed. I’ve changed through years of living during which some things I hoped for didn’t happen, some things I didn’t have. I was diagnosed with breast cancer twenty one years ago, after my first mammogram, when I was 35. I was diagnosed with kidney cancer in September and a second breast cancer in November 2010. Four years after my longtime partner died of a rare degenerative neurological disease. I hoped for the mammograms to be negative. I hoped for the kidney scan to be clear. I hope for Brenda to beat the odds for MSA.

Slowly I’ve begun to get it... to hope for can be a set up. Don’t get me wrong. I’ve not turned into a stiff upper lip person. Or become resigned to whatever reality dishes up. Slowly I am learning to hope is to be fully alive, here and now. This sounds simple. But I know I’ve lived a lot of my life on auto pilot. Or partially numb. Or racing and rushing so fast, and then faster. I have not always been fully alive, here and now. I have not always been present, really present— to myself, to others... to a crocus or a caterpillar or a child skipping down the sidewalk. I’m passing through... but am I present? Fully alive, here and now?

When I walk through the doors of the cancer center. When I go to get a mammogram. Or a scan, or a treatment. Continued on page 29.

The Andrew and Helen Pluta Family

In 1975, the Pluta Family Cancer Center was established in memory of Andrew Pluta’s father, Ron, who died of cancer in his fifties. With the vision of developing a center that would provide a quality approach to cancer care that remains focused on the experience of the patient, the Pluta family funded the initiation and gradual expansion of a facility that was located within Genesee Hospital. A warm, compassionate atmosphere greeted clients of the Pluta Family Cancer Center, which grew quickly to offer a comprehensive, multidisciplinary approach to cancer treatment. With the hospital closed its doors in 2005, Andrew Pluta and his family were determined to keep the center open. Patients and their nurses, committed to the Pluta Center concept, provided moral, and in some cases, monetary support. The center continued in its Genesee Hospital location for a few years as Andrew and Helen’s children, Bob, Ron, and Mary persevered in seeking a more stable situation. With the search for a new location came the gradual expansion of the original vision to encompass the idea of an independent, non-profit cancer center.

In 2003, the Pluta Cancer Center moved into its current facility on Red Creek Drive in Henrietta. In the face of the many demands of maintaining a non-profit center, the Pluta family, along with the physicians, nurses, and other practitioners at the center remain true to their mission of pulling out all the stops in dealing with cancer while honoring the humanity of those who are affected by it. The Pluta Center provides everything from sophisticated technology and cutting edge expertise to compassionate, patient-centered care and the healing power of human touch. In addition to the latest chemotherapy and radiation treatments, patients are offered an array of complementary therapies, such as continued on page 29.

2011 Advocate’s Spirit Award

Gloria Caraballo with her son

Friends celebrating at Lives Touched

Harry Wood hanging his message of hope on our wishing tree.

By Melanie A. Duguid-May

2011 Laurie Pask Heart & Hands Award

Sandy Sabatka

Sandra Sabatka has helped people from many walks of life build a road through the uncertain and often erratic terrain of a breast cancer diagnosis. Whether it’s finding assistance programs for an uninsured woman facing metastatic disease, accompanying a developmentally disabled woman to her appointments and arranging to be present as she awoke from oral surgery, or encouraging people to seek support programs that ultimately led to positive, life-changing experiences, Sandy is as resourceful as she is empathetic. She goes to bat for those in her care time and time again, and is pleased when she refers to the Coalition connect with us, knowing they are “tucked in and well supported.”

Drawing on myriad resources as she helps people deal with the nitty-gritty realities presented by a breast cancer diagnosis, Sandy always remembers the human touch. It can sometimes be difficult for her to know if she’s had an impact on someone’s journey and she is pleased to see her patients after their treatment has ended. As they recall the things Sandy said that helped them through the rough times, she is often surprised by what resonated with them.

Sandy puts the best of herself into guiding people through the devastation and upheaval of breast cancer. Finding solutions to seemingly insurmountable problems, she empowers her patients with the knowledge they need to carry on, and has impacted many lives for the better. When others hear what she does for a living, the usual reaction is something to the effect of “Oh, that must be so hard!” Not so for Sandy. “My patients are my inspiration,” she says. “I feel so privileged to be a small part of a patient’s journey, and truly have learned so much more from them than I could ever give back. I have learned courage, strength, fortitude, grace, and what life is really about.”

continued on page 28
“Empowerment through Education” was the theme of the Fifth Annual Conference of the Metastatic Breast Cancer Network, held on October 30, 2011 at Johns Hopkins Medical Center in Baltimore, Maryland. Here was a day dedicated to educating those dealing with the issues of living with Stage IV breast cancer, thus empowering them to manage their treatments and their lives, as well as raising awareness of this disease.

What a privilege it was for me to be able to attend these lectures and workshops. The first message of the morning was, “You are not alone.” There are over 155,000 women in the US living with advanced stage breast cancer, in which the cancer has spread to other parts of the body. Most commonly affected are the lungs, bones, liver, and brain. While this is not curable, it is treatable. There are many drugs currently being used to shrink tumors, alleviate pain, and slow the advance of the cancer. Much more research is needed to find out what technology and highly qualified medical personnel available to me. The first breakout session I attended was on the treatment of bone metastases and we saw fascinating slides of how normal bone grows and how that is interrupted by cancer. We then learned what drugs are being used to implement the destruction of cancer cells, how pain can be alleviated with radiation, and how surgery can be used to stabilize bones and provide improved quality of life. One of the most interesting seminars I attended was on nutrition and wellness. Dr. Linda Lee gave a very common sense approach to diet. She emphasized the need to pay attention to what we consume and make choices to eat only those things that occur in nature, eliminate soda, and eat whole grains and freshly prepared food, including lots of fresh fruit and vegetables. A blender can be our friend in preparing healthy fruit and vegetable drinks. She also talked about the need for vitamin D and calcium. Her session ended with an excellent presentation on ways to deal with stress. There are some drugs that help, and there is also strength in yoga, tai chi, meditation, massage, support groups, journaling, and cognitive behavior therapy. Right here in Rochester, the Coalition offers so many of these fine programs.

In the afternoon we learned a lot about clinical trials and what they have done to advance the treatment now available to those living with metastatic breast cancer. They provide a way to receive treatments not available to the general population, to work with cutting-edge treatments, to find alternatives when regular treatments are not working, and to be one who helps advance the study of metastatic breast cancer. A website with complete information on this subject is www.cancer.gov/clinical trials.

I left the conference feeling informed, exhausted, and empowered. I have a whole new list of questions and a whole new list of answers as I continue my personal journey through the metastatic breast cancer jungle. I am learning to pace myself and pursue dreams. I hope to help put a face on metastatic breast cancer, give the disease a greater visibility in the medical community, the research community, and the public at large, so that the fight for treatments to extend life and the search for a cure continues. – Marie Beyon Ray

Update: FDA Revokes Approval for Avastin  -By Pat Battaglia

On November 18, 2011, FDA Commissioner Margaret A. Hamburg, M.D., announced that she would revoke the agency’s approval for the use of Avastin (bevacizumab) in metastatic breast cancer. Citing studies that concluded the drug produced serious side effects that were not offset by modest benefits in terms of survival value, delayed tumor growth and quality of life, this decision reverses the accelerated approval status that was granted to the drug in 2008 for use in certain types of advanced breast cancer. Accelerated approval is given to medications that show promise, but is contingent on the release of information from ongoing studies. In this case, later studies did not uphold the...
For more information or to register for our programs, please call the BCCR at (585) 473-8177

**BC 101**
This program provides information and support to those who are coping with a breast cancer diagnosis. The goals of the program are to assist participants in managing the complex tasks and emotions of a breast cancer diagnosis and to empower women to be their own self-advocates as they proceed through treatment, recovery and survivorship. Our professional facilitators are eager to provide a safe, comfortable atmosphere where information can be absorbed and assimilated, while formulating a strategy for coping with each individual’s breast cancer experience.

**Tuesday Night Breast Cancer Support Group**
This discussion-based support group, led by Claire Gladwell, RN, meets regularly here at the BCCR. Join with others coping with a diagnosis of breast cancer, share your experiences and lend your support. We meet every three weeks on Tuesday evenings from 5:30 to 7 pm. Though no registration is required, please call BCCR for the next meeting date.

**Brown Bag Fridays**
At the Breast Cancer Coalition! Any given Friday at noon finds a group of women conversing over anything from the latest research on Herceptin to our own locally-funded research initiatives… from hair loss to funky re-growth… from neoadjuvant therapy to the latest clinical trials… from acid reflux to exercise… from recurring dreams to friends and family’s behavior… from prosthetics to bathing suits… from American Idol to The Amazing Race… and on and on! Feel free to bring your lunch and BCCR will provide delectable desserts! This is a non-traditional support group, which is exactly what many of us have been looking for. Brown Bag is a drop-in program. There is no need to call ahead.

**Thursday Night Breast Cancer Support Group**
This discussion-based support group, led by Peg DeBaise, LMFT, meets regularly here at BCCR and is perfect for those who are newly diagnosed with breast cancer, or for those within the first two years following the end of treatment. Meets the 1st and 3rd Thursday of the month from 5:30-7:00 p.m. This is an open support group; no RSVP required.

**Friends & Family Support Group**
For those who have a friend, partner, or family member who has been diagnosed with breast cancer, we extend an invitation to a special group designed to offer support and guidance. This group, led by Peg DeBaise LMFT, meets on the second Thursday of each month from 5:30 until 7:00 PM. When the caregiver (male or female, any age) needs support, we’re here for you! An RSVP is appreciated, as light refreshments will be served, but don’t let the fact that you haven’t called in advance keep you away! Please call 473-8177 for more information or to RSVP.

**Voices & Vision: A Writing Workshop for People with Breast Cancer**
This exciting program gives people with breast cancer an opportunity to explore and express their feelings through writing. The warm and supportive group is led by a professional instructor. Not only has writing proven to be very therapeutic for breast cancer survivors, but this program is getting rave reviews! Workshops run in six week cycles on Tuesday evenings and advanced registration is required. This workshop is limited to 12 participants.

**Peer Advocates Lending Support: P.A.L.S. SM**
Peer advocacy is at the core of the philosophy behind the Breast Cancer Coalition of Rochester. In that spirit, we have developed the PALS Program. The concept of this program is simple: individual breast cancer survivors reach out to those who are new to the disease, providing a foundation of caring through one-to-one contact, helping them to connect to resources in the community, and working hard to instill confidence in the face of a difficult situation. Please call the BCCR to learn how you can become involved as a mentor, or if you would like to be enrolled in the program after your own diagnosis to receive some much needed support and a pack of goodies.

**Gentle Yoga**
On Monday evenings, you can find women stretched out on BCCR’s floor doing Gentle Yoga taught by Susan Meynadasy, a registered yoga trainer. Yoga sessions began in Spring 2005 and have been in high demand ever since. Sessions run in six week cycles and the class is limited to 14 breast cancer survivors. Advanced registration is required.

**For information regarding our programs offered for those living with advanced breast cancer, please see page 9.**
The end of 2011 is fast approaching and 2012 is just around the corner. The last few months of the year here at the Coalition are a time of reflection about the programs and resources we have offered to those diagnosed with breast cancer. And conversely, the first couple months of the year are a time of planning and execution for future programs and resources that we may want to add to our selection of offerings.

While we often look at the organization from a strategic standpoint, we are reminded to stay close to our mission, “to provide support to those touched by a diagnosis of breast cancer, to make access to information and care a priority through education and advocacy, and to empower women and men to participate fully in decisions relating to breast cancer.” We continue to refine our programs held here at the Coalition, and I’m grateful that we have so many different opportunities to meet the needs of those who may need support. Whether they partake in a six-week Gentle Yoga session, a five-week writing workshop, or an evening to breast cancer.” We continue to offer so many different opportunities to meet the needs of those who may need support. Whether they partake in a six-week Gentle Yoga session, a five-week writing workshop, or an evening to breast cancer.

One program that does not change is our Breast Cancer 101. This program provides information and support to those who are coping with a breast cancer diagnosis. The goals of the program are to assist participants in managing the complex tasks and emotions of a breast cancer diagnosis and to empower women to be their own self-advocates through their treatment, recovery and survivorship.

To learn more about our support programs and the information available at BCCR, please call Tracey at 585-473-8177.

Are you on our mailing list?
Is your e-mail address and/or phone number a part of our listing? Please send us your information for our mailing list so that we can offer e-mail news as well as print news.

Send your information (full address or just your other details) to Tracey Dello Stritto at tracey@bccr.org

Thanks!

Many thanks to Susan Brownson, our intern from the College at Brockport! Susan was with us for 6 weeks and was ever-so helpful in all aspects here at the Coalition. Susan is finishing her last semester at Brockport and is looking forward to working at a community-based organization in the future.

We wish her all the best with her future endeavours!

As the Breast Cancer Awareness Month of October came to an end, we were able to take the time to reflect and once again realize how incredibly fortunate we are to have such an amazing group of volunteers who give so freely of their time.

The 10th Annual AKTrageous Affair was held on October 1st and raised a record-breaking $110,000. This magnificent event would not be possible without the hard work of so many volunteers. Starting with the kick-off meeting in April, gala committee members worked tirelessly to secure sponsors and donors, stuff invitation envelopes, fill out bid sheets, set up artwork for the Artist Thank You Reception, and set it up again at the Rochester Plaza Hotel the morning of the gala. In addition, there were over fifty volunteers who worked the night of the gala to register guests, sell pink balloons, monitor silent auction items, and work check-out to make sure guests go home with the correct purchases.

An amazing amount of manpower enables guests to enjoy a wonderful evening that benefits the Coalition. Thank you to every one of you who helped make the AKTrageous Affair such an outstanding success.

Our hardworking volunteers also gave their time at various health fairs this fall. Phyllis Connelly, Mary Gross, Linda Gaylord and Betty Miller represented the Coalition at the Senator Alesi Health Fair. Mary Kroll and Holly Warren “womanned” a table at the University of Rochester Breast Health Day. Mary Gross, Nancy Weinmann and Linda Gaylord volunteered their time at the Women’s Health Expo. Thank you, ladies, for all your support!

In addition, several community groups reached out to the Coalition during the month of October. Tracey Dello Stritto attended a fundraiser organized by the School of the Arts Girls Volleyball Team. Kathy Cook

continued on page 28
Eat Well Live Well

Building Your Own Tool Kit

Life gives us many opportunities to build a tool box, no matter who we are or what we do. Each attempt at making a dress, building a house, or increasing activity and eating healthier gives us the chance to learn a bit more about what works. Our experiences can be put into the tool kit and used over and over. We move forward. And when we start to look back and become remorseful or sad because our choices weren’t the best, we can ask ourselves, “If I had the chance to go back and do it again, how might I do it differently so I could stay on track?” The answer to that goes right into your tool kit. We are always moving forward and learning about ourselves. Progress, not perfection, is what we need to strive for. Each day will be different, so watch as you go along. There are always new opportunities to add to your tool kit if you look and listen.

On October 31st, 4 years ago, I underwent surgery for DCIS. It was Halloween and even though I was weak and drained from surgery, I chose to sit on my front steps to greet all the goblins, dinosaurs, bumble bees and princesses that came for a treat. I wanted and needed to have those memories for my life tool kit. Not only was it wonderful to watch the kids, but all my neighbors congregated in my yard and supported me. Wrapped in a blanket, I felt so lucky to be able to live in that moment and watch the happiness, running, playing and smiling. When they left, I was less anxious, and felt grateful that it was my surgery date but because it was a day that it was clear to me how lucky I am to be able to enjoy what life offers in the here and now. And I learned that these kinds of events are a necessary part of my tool kit - one that continues to grow every day.

Eat Well Live Well is an eight week program that is focused on eating five servings of fruit and vegetables daily. It also provides users with a pedometer to measure their steps walked each day. The goal of EWLW is to raise personal awareness of daily eating and activity levels. The Coalition offers EWLW each spring and fall. The above is an example of the weekly motivational emails that I send to program participants. My goal is to reinforce the importance of mindfulness and living in the moment, a goal that is hard to achieve when dealing with breast cancer along with life’s daily challenges.

When they left, I was less anxious, and felt grateful that it was my surgery date but because it was a day that it was clear to me how lucky I am to be able to enjoy what life offers in the here and now. And I learned that these kinds of events are a necessary part of my tool kit - one that continues to grow every day.

Building Your Own Tool Kit continued

I took the time to live in that moment. I remember it to this day not because it was my surgery date but because it was a day that it was clear to me how lucky I am to be able to enjoy what life offers in the here and now. And I learned that these kinds of events are a necessary part of my tool kit - one that continues to grow every day. »

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HOT COCOA MIX

1 C. Dry Powdered Milk (or non-dairy)
1/2 C. Good Quality Cocoa
1/2 C. Vanilla Sugar (see recipe below)
Pinch of Sea Salt

Combine all ingredients, mix thoroughly. Store in an airtight container. To make hot cocoa, add boiling water or hot milk to 1/4 cup mix. Garnish with a cinnamon stick, mini marshmallows or whipped cream. Relax and enjoy!

VANILLA SUGAR

2 C. Raw Cane Sugar
1 Whole Vanilla Bean (cut into small pieces)

Combine sugar with bean in food processor. Process until bean is completely minced. Strain sugar into a container with a tight fitting lid and store in a cool, dry place.

**CHIPOTLE CHILE GLAZE**

2 Salmon fillets
1 Tbsp. Real Maple Syrup
1 Tbsp. Dijon Mustard
1/4 tsp. Dried Chipotle Chili Pepper
1/2 tsp. Salt (Kosher or Sea Salt preferable)

Preheat broiler. Place salmon fillets on an oiled, foil lined baking pan. Combine all glaze ingredients and spread over salmon. Broil 6 inches from heat for 5-7 minutes or until cooked through. Sprinkle with a little extra sea salt if desired.

Serves 2.

* Adapted from Chef John Mitzewich

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**COLD BREW CHIPOTLE GLAZE**

1 C. Dry Powdered Milk (or non-dairy)
1/2 C. Good Quality Cocoa
1/2 C. Vanilla Sugar (see recipe below)
Pinch of Sea Salt

Combine all ingredients, mix thoroughly. Store in an airtight container. To make hot cocoa, add boiling water or hot milk to 1/4 cup mix. Garnish with a cinnamon stick, mini marshmallows or whipped cream. Relax and enjoy!

**VANILLA SUGAR**

2 C. Raw Cane Sugar
1 Whole Vanilla Bean (cut into small pieces)

Combine sugar with bean in food processor. Process until bean is completely minced. Strain sugar into a container with a tight fitting lid and store in a cool, dry place.

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Ten Years of Celebration!
By Amy Connell

Saturday, October 1, 2011 was a night to remember as the Breast Cancer Coalition celebrated the 10th Annual ARTrageous Affair at the Rochester Plaza Hotel. Although the graphics change year to year and the name of the event has evolved over time, the evening’s spirit of celebration and jubilation has remained the same. The hotel’s ballroom was filled to capacity with almost 500 attendees, 50 volunteers and 500 auction items; that’s not to mention the Ford Mustang, donated by Kitty Van Bortel, that greeted guests at the entrance of the hotel. Guests spent the evening amongst pink balloons, extraordinary artwork, overflowing gift baskets and artrageous centerpieces courtesy of Kittelberger Florist.

From our loyal sponsors, to our dedicated ARTrageous Affair Committee to the faithful artists, vendors, businesses and individuals who gave their time, talent, goods and energy, we are honored to have supported us all ten years, and our Gold Ribbon Sponsors – Martino Flynn LLC, Parkleigh, John Betlem Heating & Cooling, Inc., The Andrew & Helen Pluta Family and Schiano Law Office, PC.

Mistress of Ceremonies, Norma Holland, encouraged the crowd to bid on the array of silent auction items and to purchase raffle tickets for a chance to win the 2008 Ford Mustang Convertible as they enjoyed pink bubbly compliments of Marketview Liquor and Elmira Distributing Company. Later in the evening, the audience listened to those touched in some way by breast cancer; including Honorary Chair, Bridgette A. Wiefling, MD, CEO of Anthony L. Jordan Health Center, The Andrew & Helen Pluta Family, this year’s Advocate’s Spirit Award recipient and Sandra Sabatka, LMSSW, recipient of the Laurie Pink Heart & Hands Award. As always, the Pink Balloons, a signature piece of the event, sold out quickly. Thank you once again to Glen Mosce Jewlers for providing the Pink Balloon Grand Prize, and congratulations to the lucky winner of the pink sapphire and diamond ring – a real stunner!

continued on page 18

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Our Volunteers: ensured the evening ran smoothly, start to finish.

Mary Jo Deichmiller
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Mary Jo Ditchmiller
Tracey Dello Stritto
Connie DiMonda
Niki Duman
Jeremy Durham
Kelly Durham
Steve Eagle
Rahna Elmer
Meg Haley
Cindy Howe

and many others who made the evening possible!

* Our Warrior Wall Donors will be printed in the Spring 2012 issue.

MISSY CRINGLOW: MARYJO DUECHMILLER: JENIFER TAMAROSA: JERRY, AV EXTRAORDINAIRE: DANCING THE NIGHT AWAY

By Amy Connell
continued on page 18

Our Volunteers: ensured the evening ran smoothly, start to finish.
Ten Years of Celebration continued

Our three-time auctioneer, Carol Ritos-Wriggle, kicked off the Live Auction by creating a bidding war on a duo of Abby Wambach memorabilia. Other Live Auction pieces included original artwork by Frank Argento, Scott Saber and Gail Mazur, an Opal & Diamond necklace crafted by Cornell’s Jewellers, a trip to Las Vegas, three works of art by Ramon Santiago and a gift certificate to the NY Wine & Culinary Center valued at $2,000! Our tenth anniversary was welcomed back Gap Magione & The New Blues Band, a crowd favorite. One of the best moments of the evening was when Kitty Van Bortel pulled the winning Mustang raffle ticket and Gap and his band spontaneously started to play Mustang Sally — what a thrill! An extra special thank you to Kitty. The Mustang she donated to the Coalition raised $30,000 in less than two weeks. We are so grateful for Kathy’s contribution to the Coalition. We hope you will consider joining us in the future.

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Our generous donors.

Gala photos taken by Ria Tafani. Photos of individual art pieces taken by Palmer Photography.

Rosalie Restaurant Rosolini American & Knightriders Rochester Broadway Theater League

Holly Anderson Donna Beane Pam Bernstein Lori Betlemy Melissa Berlinski Jerrytta Boynton Pat Bradford Jen Burke


Susan Meynadasy

Sarah Webster-Eastman

Lisa Walczak

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Tom & Mary Toule

Joyce Wichie & Steve Beke

Dr. Bridgette Wiegling & Mark Schiesser

Rochester Broadway Theater League
exercise and poor diet - sustained dietary imbalance, and absorption of carcinogens (cancer-causing substances) from the environment. In some experiments, cancer cells have normalized when placed back in healthy tissue in the laboratory. New research says that one-third of patients have circulating "occult micrometastases" up to 12 years after diagnosis. What makes some of them, and not others, cause disease? Pat Steeg of the National Cancer Institute echoed this, stating that metastases are "an interaction between cancer and the microenvironment".

Julia Brody of the Silent Spring Institute (silentspring.org) addressed exposure to toxins with illustrative examples, and stressed the need for action on environmental issues. Of known chemical compounds, there are 216 (as of May 2011) identified as mammary gland carcinogens. In one experiment, five families ate nothing but fresh foods for three days - nothing processed, nothing canned. After three days, their BPA levels dropped 50%. (See past newsletters for more information on BPA-related issues.)

Dr. Peter Lee of Stanford discussed how the immune system can respond to cancer through T-cell infiltration (immune cells that attack disease), but how is this to be done? Which antigens (foreign molecules) should be targeted? Self antigens? Neo(cancer causing)-antigens? Immune modulation also has great potential for cancer vaccines, both for prevention and, for those diagnosed with cancer. The solution, he agrees, must have a targeted agent "visible" to the immune system, vaccines, both for prevention and, for those diagnosed with cancer. They have built a top-notch treatment facility from the ground up while never losing sight of the reasons for doing so, and have reached an innumerable number of people, touching their lives in meaningful ways.

The Advocate's Spirit Award is named for Harriet Susskind-Rosenblum, a Breast Cancer Coalition of Rochester Founder, and a Poet and Breast Cancer Advocate who fought a glorious battle against breast cancer. Harriet never wavered in her commitment to eradicate breast cancer. Her hope was that her daughters would not have to live with the fear and uncertainty caused by the disease that she fought against in formerly. Her Advocate's Spirit lives on in all who had the privilege of knowing her. Harriet died of the disease in October 2002.

Heart & Hands Award continued

A sign given to Sandy by the mother of her developmentally challenged patient hangs in her office - it reads, simply, "Believe." It is there to inspire all who enter the room, injecting them with a dose of hope before a single word is spoken. This is characteristic of Sandy, and highlights the many reasons she is so richly deserving of this award.

The Laurie Packard Heart and Hands Award is given to the care provider whose work best exemplifies the balance of kindness, compassion, respect and science that Laurie demonstrated while providing care to her own patients. It is our intent that this award will enable Laurie’s spirit of passion, hope, and joy to live on.

Oncology massage, tai chi, gentle yoga, support groups, and nutritional counseling. In May of this year, the Pluta Center was one of sixty-six cancer centers worldwide that were awarded a three-year certification by the Quality Oncology Practice Initiative, an affiliate of the American Society of Clinical Oncology (ASCO), for outpatient hematology-oncology practices that meet the highest standards for quality cancer care.

Barbara Bush once said of her family, “To us, family means putting your arms around each other and being there.” The Pluta family members, in addition to being there for each other, have widened their reach to encompass those in the community who have been diagnosed with cancer. They have built a top-notch treatment facility from the ground up while never losing sight of the reasons for doing so, and have reached an innumerable number of people, touching their lives in meaningful ways.

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Medical Update Notes continued

Advocate’s Spirit Award continued

The first time I met Cathy Picciotti was over the phone. She had called to inquire about the support group held at the Coalition for those living with metastatic breast cancer. I shared with her the details of the group and the dates of the next meetings. I then asked Cathy about her own journey with breast cancer. She spoke to me of her diagnosis and the details of its return twelve years ago. What I remember most about our conversation that day was her fighting spirit - she would not let this diagnosis control her life. She was determined to continue living a full, happy and content life, aside from medical appointments, chemo treatments and physical therapy. Although I had just met Cathy on the phone, something inside me told me that she WAS living a full, happy and content life!

I began to get to know Cathy through her visits here at the Coalition, and one thing I always appreciated was her honesty and determination. Her arm may have been fully bandaged to control lymphedema, but she used it as a tool to educate others about lymphedema management and advocating for yourself about any changes you may find throughout your body.

Once a year, the Breast Cancer Coalition offers an afternoon seminar designed specifically for those living with advanced breast cancer. Anyone is welcome to attend, and our presenters and speakers focus directly on topics that might interest those living with metastatic breast cancer: topics such as new treatments and trends, nutrition, bone health and many others. Along with our panel of medical presenters, we select two people living with metastatic breast cancer to speak about their experience with those in attendance. As Cathy and I grew closer, I reached out to her, asking if she would be willing to share her story at the seminar this year. True to her determined spirit, Cathy agreed and set to writing down her thoughts and feelings about this part of her life. The afternoon of the seminar, Cathy delivered her speech with confidence and thoughtful empowerment. She related some details of living with metastatic breast cancer, and spoke compellingly about the support she received from her husband, friends and family, and her relationship to her God. Once again, her honesty was a powerful tool to offer comfort and hope to those in the room.

Months later, I was shocked to hear that Cathy was in the hospital. Once again, she was fighting this disease with every ounce of her determined spirit. She passed away peacefully on September 14, 2011. Cathy’s family members and church family recalled similar heartfelt memories of Cathy at her memorial service, and it was clear that all miss her deeply. They are not alone in their loss. Although Cathy is no longer with us, she will always be remembered. Thinking of her reminds me to live a full, happy and content life - just as she did.
prescribed for Carol, and it left her with unusual sensitivity to her clothes. But she was grateful to be alive, grateful that cancer was behind her, and she maintained her positive, upbeat spirit as she carried on.

Carol and a friend went together to the imaging center for her six-month follow-up exam. To her complete shock, more calcifications were found and another biopsy was scheduled. It was another long day at the center, the beginning of a second diagnosis of breast cancer. As Carol recalls, “That was the day I fell apart. It wasn’t over. Beginning that day, I wasn’t ‘strong’ any more. I gave in to the pain of it. The pain was there before, but I wouldn’t acknowledge it; I wouldn’t allow it to control me... Now I felt I could not ‘manage’ my way through it. I had to allow it just to be what it was.”

Carol and her surgeon decided that a mastectomy would be the best option for her. At the same time, Carol made another decision that would prove to alter her course dramatically. A close friend who had faced breast cancer five years prior to Carol’s diagnosis had made a donation in her honor to the Coalition. As a result, Carol’s name had been placed on the newsletter mailing list. Throughout her initial diagnosis and treatment, she had gotten to know the organization and had read about Brown Bag Fridays. When the second diagnosis came, Carol began making the long trip from her home to the Coalition office every Friday to join the lunchtime gathering. “I met so many wonderful women who have become my friends,” Carol recalls of her Brown Bag experiences. “They gave me so much support, shared so much of themselves. As Brown Bag you are allowed, encouraged, to share all of your truth, no matter how painful it is, no matter how hateful... It was such a beautiful experience for me.”

Carol came to the difficult decision to have a bilateral mastectomy, and leaned on the unqualified support of others who had made their own wrenching decisions. “Their beauty was like a mirror for my own beauty... It was the courage I found in them that showed me how to proceed; I was able to recognize that I had that kind of courage too... It was a different kind of courage, completely different from the stalewart, ‘I can do this, no problem, I’m fine,’ kind of courage. Now it was a falling-apart kind of courage that said, ‘I can’t do this without experiencing the pain of it. But experiencing the pain is doable; I can experience it. I can deal with it. I can find my Self in this.’”

With the decision in place, Carol began to embark on a new kind of search: a search to be able to place her breast cancer journey in the context of her life. She explains, “As a chaplain, I’ve been trained to try and help others carry out their search. Well, when it was my turn, I needed the chaplains, I needed the support, I needed the people to help guide me along. And I got that here (at the Coalition).”

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Begining that day, I knew, Carol.

Making Coins Count

One year ago, when Cory and Zoe’s mother, Kathy Cook, was diagnosed with breast cancer, they took matters into their own hands! For over a year they worked hard gathering loose change from their parents’ pockets and cars (take a look in your vehicle – I bet you’d find some coins rolling around no0!). Just last month, they decided to bring their jar of money to the Coalition, donating $83.15 in honor of their mom’s fight against breast cancer. Thank you Cory and Zoe! Your mom and dad are two very lucky people!

Pathfinder Engineers & Architects “Think Pink” Day

On October 28th the employees at Pathfinder Engineers & Architects LLP made a donation to the Breast Cancer Coalition and wore pink for the day. Thank you for your $171 donation.

Zumba

On October 2nd 3rd Megan Mendoza, held her first Zumba class at the Rochester Fitness Center on Chili Avenue. Megan donated the proceeds from this class, $325, to the Breast Cancer Coalition in honor of her aunt, Kris Moss. Thank you for your $325 donation!

Dice Run

On September 11th the Cycle Stop hosted their 4th annual Dice and Bust Run to benefit the Breast Cancer Coalition. All of us at the Coalition feel so honored that this wonderful group continues to reach out each year and gives so much time and energy to this wonderful event. The motorcyclists started their day at the Cycle Stop, made several stops throughout the course and ended at Jeffrey's on East Henrietta Road. Thanks to the many generous donors there were severalaffle prizes to be won. This year they were able to exceed the amount raised and donated over $4,400 to the Coalition. Thank you to the Cycle Stop and to everyone who participates in this event for your continued support!
Tigers In Pink
On October 31st the RIT Women’s Hockey Team hosted the “Tigers In Pink” Block Party at Park Place to benefit the Breast Cancer Coalition. They sold t-shirts, pink bracelets, and autographed team pictures, and asked area businesses to also donate a part of their proceeds from the evening to the Coalition. The event was a huge success and raised over $7,851! Thank you to all who participated in this event!
A formal check presentation will be made at their home game on January 6th at 7pm. Tickets are FREE! Come to the game and show your appreciation to the RIT Women’s Hockey Team.

Livonia High School
During the month of October, teachers from Livonia High School made donations to have Master Stylist, Joe Chesbro, give them pink hair extensions and pink feathers in their hair. They raised $151 for the Breast Cancer Coalition. Thank you Joe and all the teachers that participated in this event!

Batavia Downs
Batavia Downs held a fundraiser to benefit the Breast Cancer Coalition on September 21st. Groups were able to sponsor a race for $200. There was a special Winner’s Circle presentation at the end of each race with the winner receiving a blanket with the sponsor’s name. The event raised $2,750 for the Coalition. Thank you to Batavia Downs for reaching out to the Coalition and for your continued support of our organization!

Long Acre Farms
From October 1 to October 8 Long Acre Farms held a Painted Pumpkin Silent Auction to benefit the Breast Cancer Coalition. Several artificial pumpkins were raffled off. The organization decided to donate 50% to the Breast Cancer Coalition and one other charity. Thank you for the $85 donation!

Settlers Club
Thank you to the Settler’s Club for your $500 donation.

Garage Sale
On October 3rd Debra Kaczmarek and Wendy Koch held a garage sale with proceeds going to benefit the Breast Cancer Coalition. Thank you for the $205 donation!

Reckitt Benckiser
Thank you to Reckitt Benckiser Pharmaceuticals Inc for your $350 donation and to Philip Taylor, who requested that the donation be made to the Coalition.

Harley Allendale Columbia Girls Soccer
The Harley Allendale Columbia Girls Soccer team decided to raise money for a local charity this season, and chose the Breast Cancer Coalition as their charity of choice. The girls got sponsors and sold merchandise during the season. They raised $2,780! Thank you girls for all your hard work and for supporting the Breast Cancer Coalition!

The Good Rats Concert
On September 4 the band The Good Rats! Hosted a concert, with special guest Deborah Magone, at the Moose Center Family Pavilion in Henrietta to benefit the Breast Cancer Coalition. The afternoon event included family entertainment (including animals!), food and door prizes. The Breast Cancer Coalition was so thankful to receive $1,000 from the concert. Special thanks to Joe DiMarco for reaching out to the Coalition and organizing this event.

Wayfarers’ Chapel
Wayfarers’ Chapel held a Flame of Pink event on September 17th. The event had a t-shirt sale to benefit the Breast Cancer Coalition. The Coalition received $225 from this class. Thank you, Joan, for your continued support!

Salena’s Mexican Restaurant
The employees at Salena’s Mexican Restaurant decorated skulls for their Dia de los Muertos altar. One particular skull was decorated and raffled off to benefit the Breast Cancer Coalition. The skull raised $12! Thank you to Kathryn Smith for spending the time to decorate the skull and choosing the Coalition as the recipient of the proceeds, and thank you Salena for her support in this fundraiser.

Pink Puffs
Pink Puffs provide individually packaged pink hair extensions. A percentage of the proceeds from each sale are donated to the Breast Cancer Coalition. For the month of October, a portion of the proceeds from Pink Puffs were donated to the Breast Cancer Coalition. The Coalition received $35 from this event.

Denim Days
In October Joann and Tony Ventura and Diane and Don Dowling had a Thrift Shop/Painted Furniture sale to benefit the Breast Cancer Coalition. From the sale they donated $200 to the Coalition. Thank you for your support!

More Fundraising Friends on page 28
The name of the individual honored or remembered is shown in bold type. The Breast Cancer Coalition thanks donors for these gifts made since our last listing.

Donations made after September 30th will be included in the spring newsletter.

We apologize for any errors and/or omissions on our donor pages.
Pink Ribbon Circle $1000-$4999
American Express Match
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Anthony & Francine Tramontano

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Jennifer Gentry
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Nancy Parchus
Pellegrino’s Deli Café
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Nancy Schaad

Gifts in Kind:
Terry Bognano
Kimberlee Brock
Marlene Caroselli
Amy Connell
Continental School of Beauty
Paul Garsin
Linda Gaylord
Sue Callan Harris
Bonnie Hawk
Dorrie Humm
Marcy Lazin
Bernie Lehman - Trident Global Sourcing
Harriet McHugh
Cindy Mullin
Lynn Seager
Studio 14 Jewelry Arts
Nancy Wiley

Volunteering continued
and her mother, Barbara Bonelli, along with Angie Martin and Mary Ellen Vollmer “womanned” an information/merchandise table at the Tigers in Pink block party hosted by the RIT Women’s Hockey team. Pat Bartaglia, Mary Ellen Vollmer, and Laura Robertaccio went to School Without Walls Foundation Academy to educate students about breast cancer on the day of the school’s 3K Walk and Run. Thank you for giving your time and helping to nurture the Coalition’s relationship with our community.

Volunteer Spotlight continued
The Run and Walk and the ArtRageous Affair are large undertakings that require the help of many hands. The flurry of activity in the days and weeks leading up to these events keeps staff members and volunteers hopping. Cindy’s even tempered dedication to the task at hand is deeply appreciated. Her willingness to “pitch in” when a job clearly needs to be done and no one has stepped up to the plate has earned Cindy our gratitude, and her ability to fulfill any task, large or small, with equal aplomb has earned her our admiration. Thank you Cindy!:

Executive Director Column continued
or business settings. As you read through this issue of Voices of the Ribbon, pay attention to your own voice inside that says “that sounds interesting.” Think about becoming part of a community that offers support and comradeship along the way.

There is no organization in this part of the state quite like ours. We continue to be the only full-scope, independently-operated organization focused on breast cancer issues in the Greater Rochester Region. You do not need to be a breast cancer survivor to join us. It truly takes a village. Tell others about our work, offer your support in any way you can, and become part of the effort to eradicate breast cancer. We are a powerful group. Please join us!

Fundraising Friends continued
Consumer Insights
Consumer Insights gave product testers the option to donate the $20 normally received to the Breast Cancer Coalition. The Coalition received $40 from this project. Thank you to Consumer Insights for their support and for those of you that participated in this project.

Amy Zaccaglini
Thank you to Amy Zaccaglini for the $31 raised from her Silpada Jewelry sales at the Premier Fitness Open House.

Lori Prince
Lori Prince chose the Breast Cancer Coalition to receive 10% from her weekly craft sales this season. Thank you for your $50 donation!

Lisa Smith
Lisa Smith sold a drawing on her web page to benefit the Breast Cancer Coalition. The $37 print titled “Mending” raised $70 for the Coalition. Thank you Lisa for your support!

Eribulin continued
the rest were given the treatment of their doctor’s choice. Overall survival in the eribulin group was nearly 2.5 months longer than those who received other treatments. Eribulin also appeared to enhance progression free survival. The overall response rate to eribulin therapy was substantially higher than the control group. Interestingly, among those whose tumors began to shrink, a greater duration of response was seen in the non-eribulin group.

Side effects were noted in both groups, the most common of which was fatigue. Neutropenia was also reported on both sides of the study. Twenty-four women dropped out of the eribulin group due to peripheral neuropathy, while around 25% of those in each group either lowered their dosage or stopped treatment because of side effects or complications.

Eisai, the manufacturer of eribulin, lists the full cost of $4,320 as $580. Coverage of the medication will vary by insurance plan, and Eisai offers a program to provide eribulin at no cost to financially needy patients who meet certain eligibility criteria.

The EMBRACE trial has demonstrated that eribulin can enhance both length of life and disease free survival by a matter of months, with a side effect profile comparable to other chemotherapy regimens. It offers a new treatment option for those whose disease has stopped responding to other therapies. Eribulin is still in the experimental stage, and data from the EMBRACE trial continues to emerge as scientists scrutinize sub-groups within the main study group. The newly arising data continue to favor eribulin. Questions remain about this medication and its specific applications, including whether it can be used in earlier stages of the disease or in combination with other targeted therapies, and researchers call for further study.

For more information:
http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(12)60670-6/fulltext
http://www.asco.org/ascov2/Meetings/Abstracts?&vmview=abst_detail_view&confID=74&abstractID=50309
http://www.nim.nih.gov/health/about/breast-cancer-chemo/eribulin
http://www.rxlist.com/halaven-drug.htm#
http://www.ascotreimbursement.com/halavencost
http://www.optum.com/patientassistance.aspx
http://www.psgroup.com/5266576.htm
http://www.breastcancer.org/treatment/chemotherapy/new_ research/20120117.jsp

Avastin Update continued
conclusions of preliminary trials. This ruling does not affect Avastin’s continued indication for use in certain types of colon, lung, kidney and brain cancers.

Those facing metastatic breast cancer often deal with difficult choices. Balancing the benefits of a particular treatment versus its side effects and impact on quality of life is a subjective process. However, with strong potential for harmful side effects and minimal survival benefit, it appears that Avastin did not live up to the hopes of many. It represented a novel tact: targeting the blood supply to tumors. While Avastin was not as effective as originally theorized, the knowledge gained through this process can help shape future thinking about the direction of metastatic breast cancer research.

I’m passing through ... but am I present?
Fully alive, here and now?
Slowly I’m learning ... to hope is just this: to be fully alive. To hope is not to hope for but to hope in ... to hope in place, right where we are. To hope is to hope in what is happening here, to hope in what is possible in the present.

I’m learning that to hope, to be fully alive is to be vulnerable. It is to be as bare as on the day of our birth. I don’t know what will happen in the future—there and then. But I do know in my own flesh and blood and bones the perils and the pitfalls, the dangers and the demons. So, yes, to be fully alive is to be vulnerable. It is to be as bare as on the day of our birth.

Perhaps this is the point: to hope is ... to be born again with each and every breath—again and again. Perhaps this really is the point: to hope is to breathe. To hope is to remember to breathe! To deeply fill our lungs. Whatever is going on where we are in any moment. Breathe! Deeply. Take in the breath of life. To breathe is to hope. To hope is to breathe. To be filled with the breath of life.

This is cause for celebration. We are alive! We may be scared. We may be weary. We may be scared. We may be grieving. We may be in pain. AND WE ARE WOMEN ALIVE! Women alive with possibility in this present, in this place.

So ... remember: Breathe!
Save the Date!
The Advanced Breast Cancer Seminar
Friday, March 30, 2012
1:00 - 5:00pm

The Breast Cancer Coalition is pleased to introduce a new item to our line of merchandise. This lightweight, ladies cut, microfleece full-zip jacket in Kiss Pink is offered in sizes Small, Medium, Large and X-Large. Two front pockets, open cuffs and hem and the BCCR logo complete the look. You could easily wear this fleece while running errands, working out, reading a book or even at The Pink Ribbon Run & Family Fitness Walk in May!

Stop by 840 University Avenue in Rochester or call us at 585-473-8177 for more information or to order one or more! The cost is $35.00 each. We do accept PayPal as well as most major credit cards.

Upcoming Fundraising Events

Upcoming Events & Programs at BCCR

Wednesday, January 25, 2012
Evening Seminar:
Topic to be determined
7:00 - 9:00pm

Wednesday, February 22, 2012
Evening Seminar:
Topic to be determined
7:00 - 9:00pm

Wednesday, March 28, 2012
Evening Seminar:
Updates in Hormonal Therapy:
Aromatase Inhibitors & Tamoxifen
Speaker: Tarek Sousou, MD
7:00 - 9:00pm

All events unless otherwise noted are at:
THE BREAST CANCER COALITION OF ROCHESTER
840 University Avenue
(Between Culver and Goodman)
Questions? Contact the BCCR at (585) 473-8177

Save the Date!
The Advanced Breast Cancer Seminar
Friday, March 30, 2012
1:00 - 5:00pm

Enjoy the Breast Cancer Coalition Library

The Healing Arts Initiative

The Healing Arts Initiative is an opportunity to learn about a practice you may have heard of, been curious about, or have fallen away from due to breast cancer treatment.

These offerings will be held in four-week sessions on Saturday mornings throughout the year.

Offerings such as:

- Feldenkrais
- Fluid Motion
- Gentle Yoga
- Pilates
- Qi Gong
- Tai Chi

For more information, please call BCCR at 585-473-8177
Changing of the Guard

We bid a fond and grateful farewell to our outgoing Chair of the Board, Joyce Wichie, who has overseen our organization during years of tremendous growth.

A hearty welcome to our new Chair, Patti Cataldi. Patti brings her cheerfulness, experience and long history with the Coalition to her new role.

As the baton is passed, it is reassuring to know that we continue to be in the hands of such caring, capable leaders. 🎯

Joyce Wichie and Patti Cataldi