

Remarkable Recovery Stories

There is the ancient story of a teacher and a student.

On walks in the forest, the student would pose questions and the teacher would answer—always correctly. Try as he might, the student could not stump the teacher. Finally one day, the student spotted a baby bird that had fallen from its nest to the ground. After retrieving the bird and concealing it behind his back, the student addressed the teacher: “Here is a question I’m certain you can’t answer: is the bird I’m holding dead or alive?” The teacher knew he couldn’t answer. If he claimed the tiny bird was alive, his student would crush it. If dead, his student would release it.

“My boy,” he said, “the answer to your question of whether the infant bird lives or dies is totally in your hands.”

Similarly, your life is in your hands. If you are suffering from a chronic illness, you too can decide whether you will live or die. When I was diagnosed with cancer 12 years ago, I wondered why some patients remarkably beat all scientific odds, recovering from cancer and other life threatening illnesses. How were they able to live many years beyond their medical predictions? Those questions became paramount to me as I dealt

with my own illness. I wanted to learn from these survivors, to break their success code. I wanted very much to recover and become a long-term survivor. As you’ll read in my new book—*Witness a Miracle (Your Own)!*--I succeeded.

I gleaned my survival techniques from a 30 month personal study of long term cancer survivors. In *Witness a Miracle (Your Own)!*, I describe in detail, in simple English, the 12 key survival strategies I discovered.

The people I interviewed were cancer-free or had lived much longer than their physicians believed possible. I suggest you read their inspiring stories that follow. Through a program we call *Share the Health*, we are collecting even more real life miracles, categorized on our site

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under “Remarkable Recovery Stories.”

“The most successful people in life,” said Benjamin Disraeli, “are those who have the best information.” Whatever your chronic illness, it seems only logical to pattern your back-to-wellness journey after those of cancer patients who, when faced with grim circumstances, overcame extraordinary odds. Read these survivors' fascinating stories and learn how to become a survivor yourself.

Let me begin with my own story.

Sid

Non-Hodgkins Lymphoma

I was given two years to live if I didn't seek cancer treatment, but this is how I was saved. It may sound strange, but it's true.

On August 9, 1995, after I had been practicing my visualization technique, three times a day for 2 months, something amazing happened. That evening in the middle of my nightly visualization routine, I felt a firm hand slowly cover the right side of my face, the exact area where the initial malignant tumor had been discovered. I thought the sheet or blanket had crept up to touch my face, so I reached out with both hands and drew both down to waist level. The "hand" remained for approximately one minute.

The next day, another totally unexpected event occurred. I had been working out on my NordicTrack® exercise machine. After a few stomach crunches, I decided to lie peacefully on the floor and rest for a few moments. Two or three minutes later, I felt two gentle "hands" cupping my face. There was no mistaking the feeling. Startled, I stiffened. For a split second I thought someone was standing over me and had placed both their hands on my face. I opened my eyes. I was alone. My breath stopped. The "cupping" lasted, I think, for about four minutes, but it seemed like an eternity. Try as I might, I could not dislodge the "hands," so I made the decision to "go with it." About four minutes later, I could feel an indescribable power outage take place and the pressure of the cupped hands lightened and vanished. When I arose from the floor, I placed my hands on the two areas the "hands" had touched. I could no longer feel the tumor on the right side of my face.

Granted, the first course of chemotherapy had reduced the mass by some small percentage. Certainly not 100%! Yet, it seemed the tumor had disappeared. Of course, I didn't know this to be pure fact. Only another CATscan (computed axial tomogram) would offer proof. All I knew was that the surface tumor, was conspicuously absent, whereas before this "healing incident," I had a growth larger than the size of a quarter on the right side of my face. Certainly I am aware that all of us interpret reality as we see it, but in this case, I not only saw results, I felt them.

On my next visit to my oncologist, I mentioned this incident. I explained that in the course of a single day, I had examined the growths on my face dozens of times. Yet, after my healing incident, they had vanished. It was as if they had never existed.

Understandably, my doctor said he would do his own examination. Finally, after 15 minutes of scrutinization, he said, "You win. I'm delighted."

I believe that my healing incident was, pure and simple, an extension of my visualization technique and my core beliefs and therefore a triumph of results-oriented imagery over physical matter. "If you can imagine it, you can achieve it. If you can dream it, you can become it," said Willaim Arthur Ward.

Of course, other factors were absolutely vital for my recovery, my attitude, the loving support of my wife and my eating and exercise habits -- but the key elements consisted of my visualization technique and my strong belief which is similar to that practiced by many long-term cancer survivors. My technique is laid out step-by-step in my latest book *Witness a Miracle (Your Own!)*.

But I have jumped ahead in my story. Here is how I came to know I had cancer, and how I beat it:

Before I was diagnosed with cancer, my cholesterol level was 168 mg/dl, my blood pressure was 123/70 mm Hg, and my pulse rate was 48 beats per minute. I had jogged two to three miles outdoors virtually every day for the past 30 years, regardless of the weather -and I live in Minnesota. I ate right and didn't smoke or drink. During my most recent physical examination, my physician had said I had at age 65, the vital signs of a 30-year-old. To top it off, several in my family had lived to the ripe old age of 98. I thought I was immortal and invincible.

And then I was told I had non-Hodgkin's lymphoma, a cancer, which left untreated would kill me within two years. This is how I discovered it: While shaving one day, I noticed a small bump on the right side of my face. It was just in front of my right ear, below the hairline. I thought it was a bug bite and ignored it. The following day I was invited to a party, and while chatting with a friend, who is also a prominent physician, I asked him to take a look at my "bump." He immediately suggested that I call him in the morning and said that he would refer me to a specialist right away.

Without waiting to hear from me, he called a plastic surgeon and made an appointment for me. After a brief meeting, the plastic surgeon did a standard needle biopsy. His first thought was that the growth was located in my right parotid, the gland that controls saliva secretion on that side. To be certain, he prescribed a facial CAT scan. The scan showed an abnormal growth in the lymph nodes, not the parotid gland. The plastic surgeon suggested that I undergo a biopsy of a lymph node in my neck to see what the findings would reveal. A few days later, the node was biopsied in the hospital's one-day surgery department.

On July 27, 1995, I learned I had non-Hodgkin's lymphoma. It was determined that I had, on the right side of my head, early-stage, large cell, follicular lymphoma. I also had a spot on my right lung, but my physician did not believe it to be serious and decided to observe it over time. He suggested that chemotherapy be initiated within the next 2 weeks, followed by a 3 week course of radiation treatment.

After the first shock of hopelessness and helplessness subsided, I wanted to create my own strong visualization routine, similar to that practiced by long-term cancer survivors, to bring healing images into physical reality. I made a conscious choice to actualize my full potential and

"go for it." How else in life, I wondered, could I empower myself to achieve the highest level of result-producing peak performance?

To give my immune system a massive boost, I wanted to build on clear, positive, healing images until I could evoke the full force of all my senses and emotions into my visualization technique -- a major cause of healing I believed. Early on, I thought it wise to set my healing goals in simple stages. Then, when those images were firmly entrenched in my mind, I would take the final step: Visualizing an out-and-out cure. Not a remission, but an outright cure.

I suppose you could say that even at this early stage of my cancer experience, both on a conscious and an unconscious level, I was beginning to "power" my mind into recovery. You could also say my consciousness was finally awakening to the realization that every healthy mental image and intense expectation, devoted "live" energy to being fully materialized.

It did not take me too long to discover that outcome-oriented visualization (picturing the outcome I desired as an already completed event, backed by intense belief, expectation and feelings), unquestionably is our strongest weapon.

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Kinnon Metastatic Prostate Cancer Survivor.

In 1989, Kinnon was told he had metastatic prostate cancer. It was very much a surprise. He had gone to see a urologist on a routine matter with the assurance from his general physician that there was nothing wrong with his prostate. "As you know," said Kinnon wryly, "a urologist first shakes your hand then checks your prostate. The first thing the doctor said after the examination was, 'Whoops, there's something wrong here.'" "There couldn't be," I had said, with assured bravado, "I was told there was nothing wrong with my prostate."

'No,' the doctor said, 'there is. I've felt more prostates than most physicians.'"

Next, Kinnon had blood work done and the PSA (prostate specific antigen) level indicated that, indeed, something was wrong. The urologist said he couldn't say definitely it was cancer, but it did look suspicious, and ordered an immediate biopsy. The biopsy was done at four different sites on the prostate. Cancer was found at one site, but the other sites were cancer-free. Yet, the PSA level was high, which indicated that abnormal cells had spread to surrounding tissue.

Surgery was not an option, since it would further spread the cancer.

"I was very fortunate," said Kinnon, "in having a wonderful set of physicians. My wife and I went in for consultation. We were told the precise nature of the situation and a number of alternatives. The doctor described them all to us and said he would allow us to make the choice. I don't remember all the choices but the first was to do nothing and wait and see. However, the choice that seemed most appropriate to me was radiation treatment. After I made my selection, the doctor said, 'Good, that's what I think you should have as well.' "If I had elected to 'wait and see,' however," Kinnon said, "my doctor would have gone along with that decision as well and requested the blood work be done more frequently to see what was happening."

Kinnon continued, "I had heard of holistic medicine. I remembered articles I had read in Scientific American. I started to investigate the subject of complementary medical paths in more detail. At this point in my life, a very noteworthy event took place. A business associate had been planning to sponsor a large-scale teacher-oriented workshop. In the process, I was talking to a woman who was head of a local speakers' organization called Continuum. I called and told her I had to drop out of the project because I was about to begin radiation therapy. Her response was, 'Oh, have you heard of Pathways? It's an organization that provides marvelous emotional support, meditation, imagery, and positive attitude programs designed to support a creative self-healing response to life-threatening illness.' She was very enthusiastic. I had the feeling that if I had been in her office, she would have put me in her car and driven me to *Pathways* (a wellness center in Minneapolis) immediately.

"So I got in touch with the director," said Kinnon, "and began to get the *Pathway's* calendar of programs and, along with two friends, attend its self-healing workshops. I found the workshops extremely useful. At one of the workshops, I was introduced to the practice of Swedish message/craniosacral/esoteric healing, a method to work creatively with the physical body's energy system. The instructor had me take off my glasses and shoes and then placed her hands in the region of my iliosacrum -- the lower end of the spinal column. I felt a tremendous wave of heat. My immediate comment was, 'My, your hands certainly are hot.'"

'No,' she said, 'my hands are quite cool. It's the intense energy transfer you're feeling. You're really sucking it up and that's very good.'"

"There was little question that I felt quite a bit better after this creative healing experience.

"I then asked, 'Could I learn to do this type of healing?'"

"To my surprise, she said, 'Yes you can,' which gave me considerable confidence, since I had a great respect for this woman.

"She called me a couple of week later," said Kinnen, "and said that a chiropractor in St. Paul and another Pathways provider were putting on an introductory craniosacral workshop. It would last two weekends and she'd be working there and would leave the number to call if I had an interest. So I attended the workshop, and discovered that while working with a partner, I could actually feel the energy flowing from him into my body and vice versa. Amazingly, he'd had no more previous experience than I had.

In 1989, Kinnen started to receive a full course of radiation treatment -- 5 days on and 2 off on weekends. He noted, "I did quite well until the very end, when I had a tremendous loss of energy. To avoid digestive problems, I also had to watch what I ate. My PSA level started to come down very rapidly. In addition, I began doing visualization work. Someone had introduced me to Dr. Stephany Simonton's work. She was at the University of Arkansas Medical School. I talked with her on the phone for almost 45 minutes and she gave me a lot of very specific visualization instructions that I used during radiation sessions. It was a win because I recall my urologist's surprise over how rapidly my PSA level had dropped back into normal range.

"I figured that I had the disease licked, so I backed off of the visualization and some of the other complementary programs. For example, I put red meat back in my diet and things like that. And what do you know? My PSA level started to rise again -- and rather rapidly at that -- which caused my physician to suggest that I start Zoladex implant therapy. I was very resistant to this alternative.

"Shortly after that, I decided to attend a 2-week healing intensive program on the Oregon coast sponsored by a process-oriented psychology group to see what therapeutically might take place. My doctor was concerned that I not give up Western medicine entirely. I told him that I didn't

think I would do that, but I just wanted to see what effect the healing intensive could have on my condition.

"While attending the healing intensive, my PSA level stopped rising. It went down a few points but not enough to satisfy me. Meanwhile I was starting to get pain in my pelvic area, which had developed cancer that metastasized in the bone structure. So I began Zoladex implant therapy and had bone scans on a regular basis to see what was taking place in the region. Of course, I immediately got back on the wagon with regular visualizations.

"At the healing intensive, several meaningful things happened. I met a hypnotherapist, a native of South Africa. She had had polio as a child and was left with residual damage between her shoulders. I helped her with this problem. In turn, she taught me a rapid hypnotic induction that led me to develop a healing visualization of my own -- quite a powerful experience. I had noticed that the visualization work I'd done previously with others had a lot of the content of the other person in it. I always had the feeling it was his or her visualization and not necessarily mine, since I was asked to 'see' it their way. Often, it just didn't ring true for me. This, however, was mine, in that I was supplying the visualization. The hypnotherapist was just supplying the process.

"The bone cancer eventually went away. At one point though, it had gotten quite painful and I was afraid I would require radiation treatment. But I've had no problem with the bone cancer for four years now.

"There was a physician at the healing intensive, who, for the past seven years, had had terminal leukemia and been given four to six months to live. He said that what he had found most therapeutically useful to him was work with the shamanic journey. Shamanism is a name for the spiritual systems used by most of the world's tribal peoples. He gave me the telephone number for the Foundation For Shamanic Study which I contacted.

"What I have found to be continually true in my own life journey is that the ancient expression, 'When the student is ready the teacher will appear,' is true. Upon investigation, I discovered that Pathways already had an introduction to shamanism course on its calendar, which I then attended. I also joined a local shamanic drumming group that got together to regularly journey together. It's been a wonderful and most successful experience. (Note: Shamanic Healing beholds the union of all living things and allows the practitioner to directly communicate with the wisdom of the natural forces of the universe.)

"I've learned through the cancer experience," said Kinnon, "to let go of the personal trappings of life. They no longer have the importance to me they once did. I've discovered how to deal more with the process of living and to live in such a way that I will somehow get the outcomes that I want without focusing on the results. I've learned that the ultimate outcome is a derivative of going through the right process of living and that means properly taking care of myself.

"I also believe that everything has spirit and that we are all spiritually connected. Also, I believe that I do not have to have an explanation for someone's healing experience. I do believe one's intention is very important. I don't really have to understand everything. I now trust that many things in life are a mystery. So be it.

"In regard to diet and vitamins, I adhere pretty much to Andrew Weill's regimen, the physician who wrote Spontaneous Healing. I believe, however, that the word 'spontaneous' is a misnomer. From what I have seen, healing is only 'spontaneous' if you work very hard at it."

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Richard Prostrate Cancer Survivor: 9 years

Dick's cancer experience began when he read about a free prostate exam in the newspaper along with a description of the symptoms, which sounded much like those he was experiencing. After giving a blood sample for assay, he was told that his PSA level, the indicator of potential prostate cancer, was 18.8ng/ml -- which is very high. He then underwent 11 biopsies, which were followed up by MRI (magnetic resonance imaging) and a bone scan. He was told that he had prostate cancer and that it had spread to his right pelvic area and the middle of his back. Dick was informed of his medical alternatives: surgery, temporary chemical castration, bone marrow transplantation, or observation and the chance that the cancer would spread. Dick was told he had a Stage D-2 tumor, which, he said, "is the worst or last stage before you die." He opted for medication and underwent maximum radiation therapy to his back and both sides of his pelvis. Then he went home to break the news to his wife, Martha. Although she later admitted she was consumed by fear and wondered how they would stay alive financially, she had said, "You'll figure out a way to get over this."

Dick was not ready to die. He wondered, "What can I do, who can I call? How can I pray? What can I do to kill this cancer?"

Dick explained, "This is the meat of the healing process. This is what goes on in everyone's mind when they find out they have a life-threatening illness. If you can't get by this fear, it will kill you. You have to believe passionately that healing is possible."

He noted, "At Christmas, there was a big box for me under the tree. Inside was an old trout fishing basket that contained about 20 positive things that had happened to me each written on a heart-shaped piece of paper. Martha had taken the suggestion of a friend who had said, 'Take each good thing and put it in a little basket and when you need help, reach in the basket and take several out to give you a life.' I have added regularly to that basket and find that I feel really good when I know they are there to turn to. Martha did much more -she basically supported me financially, physically, and mentally. What a wife!"

"Perhaps the biggest miracle, though," said Dick, "was my use of visualization. I knew that people had been helped by picturing in their mind's eye success as the cancer disappeared. I know that this word-picture approach was similar to one I had learned as a Dale Carnegie instructor in the '60s."

At first, Dick had trouble picturing anything. He knew that some people pictured a Pac Man eating the bad cells, while others used a variety of symbols, sometimes violent, because of their anger. But he could not come up with a good visualization routine of his own.

Then, one day he visited a local shaman. He noted a white partial skeleton the shaman used for demonstration purposes and suddenly "saw" the white pelvic area and backbone as his. The skeleton became his basis for visualizing perfectly clean, white bones. He remarked, "I pictured this mental image constantly, and still do whenever I feel the effects of irradiation. I also keep telling myself that my bones are growing back normal. I recognized that I could create this mental picture while I talked on the phone or while I was doing almost anything. It was at this point that I 'knew' my visualization activities were working. And they did!"

He continued, "I started with a PSA of 18.6, and my goal was get it down to 2.0. This happened to be my grandson's hockey number, and so it became my 'lucky' number. My PSA reading did go down quickly, to a reading of 3.0. When I went in for my next PSA test, I 'knew' it was going

to be a 2.0. I looked at that needle taking the 2.0 blood out, and even before I received the results, I cried big tears of joy and ecstasy. I `knew' I had beaten cancer before it had beaten me. "My feeling," said Dick, "is that God gives each one of us a perfect gift, one that we can quickly destroy by our stupidity and lack of understanding. The truth is, there is no separation of mind and body. They are one and the same. They `talk' to each other. And that's why self-healing such as mine takes place. A closed mind is the most expensive thing you can own. On the other hand, if you choose to open your mind, you will be shown the `way' to overcome any obstacle -- if you want it badly enough. Never allow pictures of success to be pushed aside by pictures of failure." Dick said he soon realized that "it is the destructive nature of fear that kills, because if your mind thinks you'll die or thinks you'll get better, it's absolutely right either way. According to Sue, pediatric cancer patients who achieve the most remarkable long-term results are those whose parents are mentally tough (the "ornery" type). In some inexplicable way, they transfer this attitude to their children.

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Roy Gastroesophageal cancer Survivor:

The physician who first diagnosed Roy with gastroesophageal cancer some 18 years ago told him that he had a 2 in 100 chance of survival and that "it would be best to go live it up for 6 months and let it go at that."

Roy responded, "I'll be the one or two who makes it. Deep down, I know I will." Roy is a survivor because he believed he would be.

After the diagnosis, Roy consulted another physician. Shortly before Roy's first appointment, the doctor had finished an eight-mile run. Roy was impressed and felt an instant rapport with the physician. Roy later allowed him to remove the tumors from his stomach and surrounding tissue. During this time, Roy's wife began purchasing tapes and books on visualization techniques, combining the practices of modern medicine with mental imagery. Roy intensely and systematically practiced his visualization routine several times a day.

Yet the reason he believes he's alive has to do with his strong will. Asked why he thought he had survived a usually fatal cancer, Roy said, "Well, my current doctor also tells me that statistically I'm the one or two in 100 that made it. I know this, is true because I'm a survivor. I'm a stubborn person who seldom gives up. I'm a former professional fighter and have been told by a number of fighters that I was the most tenacious opponent they ever met. In addition, I've always felt that deep down I have control over sickness and my immune system, and therefore can actually will myself well."

Roy's mental toughness is remindful of a quote by Evander Holyfield, the former Heavyweight of the World, who against all odds beat a formidable foe in Mike Tyson. "There's no quit in me," he said.

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Marlene Lung and Breast Cancer Survivor

After I interviewed Marlene, I was reminded of a quote by Henry Miller: "If we are always arriving and departing, it is also true that we are eternally anchored. One's destination is never a place, but rather a new way of looking at things."

A world traveler and fearless adventurer, Marlene is affiliated with the Miss Universe Pageant, a responsibility that requires rigorous discipline.

Marlene's lung cancer was diagnosed in 1983. Given the circumstances, the diagnosis shouldn't have come as a shock to her. "You know," she said, "I used to say that the only way I'd quit smoking is if I got cancer."

To make matters worse, she was found to have breast cancer in 1990. Marlene remembers the insensitivity of her oncologist, who favored surgery, who said, "I don't understand you women. You all have a fixation with breasts." Her niece, a radiation oncologist, had a different perspective. She said, "I'm in the business of saving breasts." Suffice it to say that Marlene wants women who have breast cancer to know that they do have a choice.

Marlene's initial reaction to the tumor on her lung was total numbness. She was so traumatized, she said, that that evening she emptied a bottle of Grand Marnier and played piano until early morning. To compound matters, she and her husband were getting a divorce. Fearing death, she decided to put her affairs in order.

But this fatalistic attitude didn't last for long. Marlene believes she is a long-term cancer survivor because she literally willed herself to survive. "I decided," she said, "that I wouldn't roll over and play dead.

She continued, "I discovered that my life has meaning and purpose. My cancer experience taught me not to put up with a lot of petty stuff. I made it a point in the majority of my daily dealings to 'cut right to the chase.' I must say, however, that even though I take this no-nonsense approach, I'm still fair and objective in my dealings with others. Still, if something feels false, insincere or hypocritical, I just don't have time for it. This may not be only because of my cancer experience, but because I've had to live alone and learn to take care of myself."

Marlene says she learned during her cancer experience that she was a total human being, well-grounded and strong-willed. She recognizes that the disease had awakened in her a true act of courage, which went a long way to restore her inner confidence.

She said, "Most important, I believed in myself. I learned to respect myself because I was proud I had survived. And I did it alone. Let me say that I'm very proud that I survived cancer, and in a very real sense, I made this reality happen all by myself."

Marlene notes that her cancer experience also gave her a new perspective, one that involves respect and love for the primal qualities of beauty and nature. Now she is able to escape the conditioned restraints of her former views of life and sit in reverence as she watches her cats play, takes a walk on a cloudy day, or whatever. She finds that tuning into these events increases her energy and helps her reclaim her soul.

"In one sense," she said, "I find that I'm more compassionate and sensitive to others." However, she also admits that she is less tolerant of people who are empty, who whine, who fail to deal with their unhappiness. "A better way to put it," she says, "is to say that I hate people who cry with a loaf of bread under their arm." "What I'm really proud of," she went on, "is that I've created a wonderful job that allows me to travel and to do the work I most enjoy. I believe that I alone made this reality happen. Mine is truly an exciting life."

"Sure," she said, "at times I beat myself up and get depressed. However, I'm aware that when I act as if I'm okay, I feel much better. I'll tell you a secret. I've already written my life-script. I'm going to live to age 95 and die in my sleep. My challenge is learning to follow my script. Deep down, I believe that if my intensity is strong enough, I can will my thoughts to happen."

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Bess Breast Cancer Survivor

Attitude within, healing without. Bess believes this to be true.

While she was showering one day, she felt a lump in her breast. "I was getting ready to go to a sale with my friend and instead decided to go directly to my doctor's office. That was on a Wednesday. On Friday, I had a complete or radical, mastectomy. A week later, the surgeon removed my ovaries because of his concern that their secretions would feed cancer cells. Chemotherapy at that time was not known. Instead, I had 25 radiation treatments and I remember how fatiguing they were.

"I decided to live one day at a time. I was young at the time of the diagnosis and I asked God, 'Please, just let me live to see my children through high school.' Later I prayed to see them graduate from college. And so on. My husband was really wonderful. I continued to wear low-cut sexy dresses and never once did he ever make me feel I was less sexy because of my mastectomy. Just the opposite. He was supportive and always made me feel loved.

"As a result of my bout with cancer, I became extremely active in cancer prevention and research organizations. I felt that since God had given me life, He wanted me to live so that I could accomplish worthwhile things and give something back to my community. I became a president of a number of organizations. I also made it a point to speak to the husbands of cancer patients -- when they most needed emotional support. I spoke to patients with newly diagnosed cancer and formed a cancer chapter in my own immediate area."

Bess has won a number of prestigious awards for her efforts. The potency of her hard work and achievement had repercussions and rewards that reached far beyond the walls of her home -- all as a result of her bout with cancer.

"The lessons I learned are not to take anything for granted, to keep an open mind, and to believe that tomorrow will be better and brighter. I still question why bad things happen to good people, but I make it a practice to read uplifting material and to never dwell on things that are sad.

Throughout the years, I have always felt that I had lots to accomplish. In addition, I have also believed that 'a person's reach should exceed her grasp, or what's heaven for? '"

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Elaine Non-Hodgkin's Lymphoma Survivor

"When confronted with a diagnosis of cancer," Elaine said, "my first reaction was total shock, which turned to fear and then to anger toward my doctor. The reason I was so angry is that over a period of 8 months or so, several times I had pointed out a lump in my groin to him, and he had said absolutely nothing. My first thought when I learned of the diagnosis was, 'I'm going to die.'" At that time, her husband, Howard, had said, "Listen, I'm not going to let you die! We'll get through this thing together."

"I have to tell you, Elaine said, "Howard was unbelievable. He turned my attitude completely around. Although I had hit bottom emotionally, the strength of his remark touched my heart and literally resulted in a major change in my attitude. In addition, my husband is one of the funniest people alive. I can't tell you how helpful a good dose of his humor is on a daily basis."

She also recalled an event that had helped her to deal with cancer. Interestingly enough, it was a golf match during which fear overcame her. "I became so anxious to do well," she said, "that I paralyzed myself. Mortified, I could barely swing the club. Finally, I decided to visit a hypnotist and get myself back on track." Five years later, when her cancer was diagnosed, she remembered the golf incident. "Quickly," she recalls, "I made the decision to use visualization to get well. Just as I knew that the negative thought processes of my mind had the power to paralyze my body, so too did I know that positive mental imagery could cause healing. My key discover of the oneness of the mind-body connection was a major influence on my recovery."

Elaine explained that she lives in a neighborhood seeded with heavy doses of pesticides, and that some of her neighbors have already died of cancer. She believes that exposure to pesticides, pollution, chlorine in the water, sunlight, smoking, butter, meat products and stress all cause the body to create free radicals which attack the DNA and cause cancer. Elaine is firmly convinced that to build up her immune system's strength, it is critical that she takes daily doses of vitamins E and C, betacarotene, selenium, and other antioxidants to prevent free radicals from attacking her healthy cells.

She is also convinced that the 19 mercury fillings in her teeth were a key factor in suppressing her immune system to the point where it left the door wide open to cancer. Removal of the mercury left her feeling much better.

Even though the American Dental Association does not agree with Elaine, Robert S. Willix, Jr., M.D., in his book *You Can Feel Good All the Time* has stated, "A study from the University of Calgary department of medicine proves that mercury vapor gets out of the fillings and finds its way into your body tissue out of 1600 people who had their fillings removed, 89% said their allergies or digestive problems were cured or better."

Elaine stressed that she has had far too many clinical encounters with physicians who have demonstrated (not maliciously or willfully) a totalitarian perspective in regard to her recovery -- a blind spot that hinders them from exhibiting anything but a superficial awareness of what genuinely transpires emotionally deep within the patient. According to Elaine, many physicians are simply unable to separate the disease state from the person with the disease. And, in not knowing how to relate well to their patients' basic human needs, too many doctors insulate themselves by falling back on sterile scientific statements of fact; or medicalese. A physician's

use of this language is potentially life-threatening at the time when a patient is already a haze of fearful negative inner messages.

Looking back, Elaine deduced that aside from disassembling a patient's fabric of trust and hope, such a seemingly unconcerned, one-way communicative demeanor precludes patient feedback, which can be potentially devastating to the patient's emotional and physical well-being. Lacking empathy and unable to offer emotional support, a doctor can ultimately become an enemy instead of an ally in the recovery process.

"For example," Elaine said, "the oncologist I first consulted was demeaning, arrogant, condescending, and totally disrespectful. Honestly, I've fired more physicians than I care to remember for just such reasons. You see, as far as I'm concerned, respect for basic human needs is a top priority in a doctor-patient relationship. In my book, there is no middle ground for lack of respect for human dignity. These days I no longer resist the temptation to tell a physician exactly how I feel."

Elaine added, "Today, when things just don't feel right, I say so. I've finally learned how important it is not to suffer silently. Now I'm able to effectively communicate my inner emotions and to meaningfully 'get it all out.' Believe me, this was not always so! The old me was kind of a martyr who I now see as someone who can fall easy victim to illness. Today, my perception of myself is radically differently. Now, I make a conscious effort to avoid irritating people and situations. For instance, the other day I had an appointment to have my nails done. When I arrived, I found the manicurist terribly unpleasant. On the spot, I decided that I was under no obligation to sit through what could have been a most distressing situation."

Elaine noted, "My overall purpose is to help others. I now feel I've set the stage and orchestrated what I have to contribute, so that I can be here for everybody who needs my help. This gives me a full-fledged feeling of personal responsibility and fulfillment. I made it a practice in the past, to help people with cancer, and, of course, my intent is to continue to do so, but I must confess that I have a lot of trouble dealing with people who erroneously decide there is nothing they can do about their condition. That attitude can be unnecessarily tragic. I find the intensity of interacting with these resistors drains me of a great deal of energy. If I had confined my thinking like they do, it's likely I wouldn't be here today.

"I've also tried to make each day of my life more meaningful. I love everything about life. I run a very hectic daily pace, yet I stay in the moment by taking time for what's really important. I'm talking about little things most people ignore or simply can't relate to unless they've been through a life-threatening situation."

Elaine went on, "Put to the test, there is a tough side to me. But by no stretch of the imagination am I arbitrary or mean. Actually, I'm extremely fair. However, the lesson I have learned of life is this: Now I know exactly what I have to do in order to survive."

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Al Cancer of the kidney Survivor

"When I lost my leg, 21 years ago because of a World War II service-related incident, I had just been promoted in my job," Al said. My first thought was that I would now lose my new position. Fortunately that never happened. Guys in the office came to cheer me up and it would always end up the same. I would be the one cheering them up. The same kind of thing took place when I got my new artificial leg. I made up my mind that I'd learn how to walk on it better than anyone else.

"My entire life is based on thinking positive thoughts. So when I lost one kidney due to cancer, my lifelong attitude didn't change. I simply made up my mind to prevent the disease from spreading to other parts of my body.

Al first detected his cancer when he noticed blood in his urine. He made an appointment with his family doctor and was sent me to a urologist who took a CATscan and a series of other tests. It was determined that he had a tumor in his kidney, and the kidney was removed.

Al said, "Just recently, I again noticed blood in my urine. Given my past history, that was a frightening experience. I decided to go to the Mayo Clinic this time. They scanned the area and told me the cause of the bleeding this time was due to a kidney stone. What a relief! I've beat cancer, and I'll continue to do so. Here's why? To me the most important thing is to have a positive attitude in all aspects of life. I believe you just can't afford to be negative in any way. You have to believe that you have the ability, when called on, to be successful through all of life's challenges."

Al added, "Also, I find that as you get older, it's more important than ever to take good care of yourself. For example, I exercise every single day of my life. And, as best I can, I try to watch my diet.

"After losing my leg 21-years ago and then 7 years ago being diagnosed with cancer, I remember thinking, 'What could possibly happen next?' But deep-down, I knew I would get through the experience successfully. I just felt it. Probably because I've always thought that way. I truly believe that."

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Norbert Adenoid Cystic Carcinoma Survivor

When Norbert was a youngster, his father was killed by the Nazis. Fleeing Germany and living by her wits, his mother did what she had to do to survive. It was an early lesson in survival. Norbert's battle began in 1967 with the diagnosis of adenoid cystic carcinoma. Told by physicians that the disease spreads relentlessly throughout the body -- from the parotid gland to the lung and eventually to the liver, bone, and brain, Norbert's initial response was disbelief. He was only 27 years old.

He said, "I could always see a future to my life. At the time of diagnosis, however, most people were fearful of the very word cancer. I knew my friends were looking at me and thinking, 'It was nice knowing you.' They were the ones grieving, not me. I told all of my friends, 'I'll be just fine.' Basically skeptical, they answered, 'Hmm, right, sure.'

"I wasn't in denial either. I went on with life, acting as if everything was going to be okay. I was merely trying to survive. In fact, I resented the fact that others felt sorry for me. "What really turned me off, though," continued Norbert, "were the doctors who asked me outright, 'Are your things in order?' In essence, they were telling me, 'Your options in life are all up!'"

Marlene, Norbert's wife, adamantly said, "We soundly rejected such daunting medical opinions. We simply moved on to a doctor who could give us faith. Believe me, we left more than a few doctors behind."

Norbert had his first operation in the fall of 1967. The tumor returned in 1968, and he then had a full lifetime dose of radiation. For the next 14 years, there was no evidence of the disease. Then in 1982, the tumor returned and Norbert was told by doctors that there was nothing much else that they could do for him.

He was shocked by the cancer's recurrence, because he had thought that after 14 years without problems, he was probably cured. The comments his doctors had made so long ago came back very vividly and he felt that he could be in serious trouble. Not knowing how far the tumor had spread, he felt it was necessary to seek the best medical treatment possible and do whatever was necessary to arrest this situation. Norbert and Marlene contacted a number of physicians in Dallas to find out where the best treatment might be available. The consensus recommendation was M.D. Anderson Hospital in Houston so that was where they went.

Marlene noted that the "people at the M.D. Anderson Hospital are aggressive and willing to do what others will not do."

Norbert underwent surgery in December of 1982 and everything went fine. Again, he felt good, but a facial nerve had been cut and the right side of his face was permanently paralyzed. "But," he noted, "life goes on and I dealt with my freakish appearance as best as possible." He realized that his appearance could possibly affect his professional and social life, but decided not to allow it to affect him. After all, it was most important to be alive, provide for his family and live for all that still lie ahead.

Norbert had semiannual checkups for the next three years without problems, and again, he felt that perhaps the cancer was cured. Unfortunately, in April of 1985, the disease recurred. At this time, surgeons had performed a radical operation that left a permanent recess in his neck. This was his fourth surgery of the neck.

Norbert continued having his semiannual checkups. In May of 1986, fifteen to twenty tumors were discovered on his lungs. Norbert was advised by his medical team that "with so many tumors, surgery would not be a good option. Chemotherapy would, at best, be only 20% to 40% effective, with possible devastating damage to his body." Most of his doctors seemed to feel that an operation would probably be fatal or leave him at best, incapacitated.

Fortunately, after careful consideration, one surgeon, who represented the committee of specialists, stated that he was willing to attempt the surgery. The reason for his "yea" vote was that Norbert was an inveterate jogger and his oxygen consumption test indexed at 180% of normal. In addition, Norbert's young age and excellent physical condition led the physician to believe he would indeed survive the surgical procedure.

During surgery, it became apparent that three tumors were precariously positioned behind the heart and so would be too difficult to remove. Norbert knew his ordeal was not over, but at least he knew he was alive and ready to fight another day.

Norbert had four more operations on his lungs in 1987, 1990, 1991, and 1994 -- for a total of nine cancer surgeries. In addition, he had five facial reconstructive surgeries between 1987 and

1995. In 1989, Norbert had a terribly debilitating stroke that was most likely related to the radiation treatments he received in 1968.

Norbert's philosophy throughout his ordeal was that "this operation is just an inconvenience. I'll have the body fixed and I'll be back in a few weeks. I don't have a problem--my doctors have a problem." He explained that he sees his body as something that simply needs repair, and otherwise he truly believes -- and acts if -- he is, in fact, a healthy human being.

Asked what he has learned from his cancer experience, Norbert replied that he has progressed from being a non-religious person who senses that God is not a personality but that everyone is a part of God and "God is a part of who I am." He believes that all forms of the universe are God and that everything is an expression of God. He stated, "When we pass on, there is no loss, merely a transformation to another form of energy."

He went on to say, "I was brought up with the idea that you do whatever it takes to reach a particular goal. I used to live for tomorrow. Now I stop and take time to appreciate things. For example, I am no longer totally focused on merely material gains. I've learned this is not the only objective in life."

He continued, "I don't get `down' too often. Somehow I know it's only a matter of time until I'll recover. Sure, some moments are unpleasant, but they are not earth-shaking. I have very little `down time' actually. Generally, my thoughts revolve around `What do we have to do next to get on with life?'"

Marlene added, "I tell Norbert that no one will ever care about us as much as we do and that the power to change our own condition is ours alone. I have also found an inner strength I never knew I possessed. Even though I believe in a Higher Power, I am quite practical in my outlook, since my normal response is first to take care of whatever present problem requires direct attention. As a mother of a one-year-old child who has a father with cancer, I learned rather quickly that you do all that is needed to survive. You take care of each concern and get on with your life. We always try to live a basically normal life."

Marlene feels that Norbert's healthy perspective has been an incredible inspiration for family and friends on how to meet and overcome adversity. His hope never wanes. She believes he learned his will to survive from his mother. "Just as it was with his mother, said Marlene, "it is second nature for Norbert do whatever it takes to survive. That's the way he is."

"Adversity is a great teacher," added Norbert.

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Dawn Breast Cancer Survivor

The head of mission control of the Apollo 13 flight said, "Failure is not an option." That is exactly what Dawn's irrepressible personality reminded me of. After spending ten minutes with her, it was clear that her attitude is an object lesson that crisis cannot conquer spirit and that recovery is another word for optimism.

Our interview began in a coffee shop, where Dawn related her family's struggle against cancer. Her mother and brother had died of cancer, as had her mother's father. Her mother, she noted, was an extraordinary person. She was full of life and had unlimited energy. Even now, Dawn recalls the day that her mother felt unusually tired, which was rare for her. A visit to the family

doctor revealed a lump in one of her mother's breasts. The next day, her mother was admitted to a nearby hospital. One week later, she died.

Dawn's is a different story. At age 24, after a routine physical exam, she had her first biopsy. She was deemed clear of cancer. The doctor who gave her the good news was delighted, but Dawn wasn't surprised. She explained, "I was never programmed to think of cancer, even though I lost my brother and mother to the disease."

Unfortunately, however, cancer did develop. At age 39, Dawn felt a small lump on her breast while showering. She and her husband immediately went to see a doctor. She was told that she needed a biopsy because the lump looked suspicious.. Shortly after, the lump was diagnosed as cancer, I attended a funeral "because I kept thinking I had to carry on and do everything I was supposed to do." The next day, she entered the hospital. When her husband questioned the surgeon about complementary treatments to preserve her breasts, the surgeon became indignant and said, "Don't question me. There are no options."

One lymph node contained cancer, so her surgeon suggested that she see an oncologist, a wonderful physician who suggested she enter a 2-year preventive chemotherapy program - because the cancer cells in the lymph node could multiply and spread to other parts of her body. She noted "After the first few months of treatment, I experienced some slight fatigue. And the drugs completely stopped my menstrual period. Yet I was grateful to my physician because women with breast cancer whose doctors did not prescribe chemotherapy are no longer with us." Dawn credits her husband and children with bravely giving her enduring support during this cancer crises. "I want to emphasize," she said, "that throughout this crisis my husband and my family were beyond wonderful as a support system."

Dawn has to chuckle over an experience she had while on vacation. While swimming in a pool with her daughter, she lost one of her breast prostheses. Searching about, she noticed it floating on the water. She said to her daughter, "You know, we can laugh or cry over this incident. I choose to laugh." She continued, "I was never a believer in the 'Woe is me' attitude. Even though I was once full-breasted and now no longer have breasts, I am alive. It's very easy to remember that my mom, grandfather, and brother are gone."

Seven years after her total mastectomy, Dawn's doctor recommended limited breast reconstruction. He knew of a good plastic surgeon, and believed that the procedure was covered by insurance. Quickly, Dawn made an appointment with the new physician. "It was amazing," she said. "The doctor engaged me in a 2-hour caring conversation. He was absolutely terrific. He said the procedure would take more than 7 hours, since it entailed removing muscle from my back." He also warned her that the procedure might not work, but noted that the odds were 70:30 in her favor.

The surgeon made it a point to tell Dawn that he had hand-picked the surgical team. She said that her only fear concerned the anesthetic. She had heard horror stories of patients who had been disabled by an anesthetic agent, or worse, of patients who hadn't come out of the operation alive. The doctor assured her she had little to worry about, which calmed her immensely.

Before surgery, Dawn was not given a tranquilizer. She said, "I felt no need for medication to relieve anxiety because my thoughts were all positive."

Noting her affable and easy-going outlook on life, her surgeon said, "Dawn, I feel sorry for you. With your amazing attitude, no one will give you the sympathy you deserve. They probably won't believe the actual ordeal you've been through!" He also told her that she had an 85% better chance that cancer would not develop in the area around the right breast. During reconstruction surgery, he had removed suspect tissue that could have spread to adjacent lymph nodes.

Four days postoperatively, disaster struck. Dawn explained, "I had been feeling good up to that point, when suddenly, I felt as if someone was repeatedly sticking a knife in my back. The pain was excruciating and located in the exact area of my back where muscle had been removed." Sure enough, when the surgical bandage was removed from her back, the entire area was an open sore. It seems that Dawn was having an extreme allergic reaction to the surgical tape.

After her recuperation, Dawn was approached by a TV reporter who wanted her opinion regarding the breast cancer treatments available at that time, especially breast reconstructive surgery. Dawn's physician had recommended her for the interview. It was easy to see why. Dawn was committed to the idea that she would get well -- and she acted as if this were true day in and day out. "During the TV taping," she said, "several of those interviewed were convinced they had been given a death sentence and were going to die. Others could not shake off their 'Woe is me' attitude. Still others cried when they showered and looked at their bodies. As for me, I was just happy to be alive."

Twelve months later, Dawn underwent another reconstructive operation to have a nipple attached to her reconstructed right breast. "After that," said Dawn, "I thought I would never have to worry again. After all, 5 years had passed and I thought I was 'home free,' that is, until I attended an all-day health seminar and the instructors talked about the possible recurrence of breast cancer. It was like an electric shock went through me when one of them said that the disease could show up in other parts of the body. The statistical evidence they cited was very disturbing."

Dawn spoke to her doctor about the seminar. He said, "Listen, you're under my care now and I'll keep you healthy. Just go home and keep doing what you've been doing and be sure to have your checkups." With an empathetic physician at her side, almost all of Dawn's remaining uncertainty disappeared. She continued to go in for a checkup every 6 months.

"I work hard and long hours," Dawn noted, "but I'm a high-energy type who still goes out after long hours of work. My fellow workers head home to watch TV. That doesn't fit for me. I work hard and I play hard. You see, life is short and I realize that I have a long time to sleep."

Dawn continued, "Life is special. I've been blessed with lots of energy. And, I might add, a loving husband who is also my mentor. I also have loving and supportive children. With all of that going for me, I hold on to life dearly. What I've learned is that life is short, so you better make each day work. Make each day count. I've learned to make it a point not to let petty things upset me. For example, if a client gives me trouble, I try to remember what really matters in life. With this attitude, I can overlook little things that are of no real importance.

"Today, 22 years after my breast cancer was diagnosed, I'm still thankful for each new day. I have to agree with my son when he says, 'Ninety percent of what happens in life, you simply can't control. The one thing you can control 100% of the time is your attitude.'"

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Max Bladder Cancer Survivor

Even at 93 years of age, my dad clearly embodied the idea that "you bring to life the way you think, expect and feel" school of thought. Growing up with this amazing man has been an enormously instructive observational study, for here is someone who, through a "seamless" mind-body connection, has probably surpassed almost everyone else on this planet in his

recovery from cancer and other life-threatening illnesses. I am talking about almost unheard-of "back from oblivion" finishes from which most people would be reeling on the ropes, ready to call it quits. Around the Levinsohn household, we figured that Max has had many more than nine lives. After each terrible crisis -- be it cancer, heart attack, open heart surgery, diabetes, or the death of a loved one -- has come an almost unbelievable turn around.

After one bout with cancer, I tried to convince my dad to eat a sensible diet. He had always been a lover of greasy foods, and I wanted him to start eating more healthy foods. He nodded his head and continued to eat exactly what he liked. The reason he continued to live was that he acted as if he would never be a victim of cancer. He wasn't refusing to accept that he had cancer; he was rejecting that he would succumb to cancer.

Simply put, my dad had an in-built "wellness filter" that allowed the free passage of thoughts of healing and blocks the passage of thoughts that contradict this belief. Ignoring the "fact" that his body had exhibited cancer or some other life-threatening illness, he had gone about creating new images of wellness, which eventually cleared up the condition.

Through one major crisis after another, Max's irrepressible attitude never wavered. Each time, he lightened the load with his familiar line of cheer, "Don't worry one bit. You'll see, I'll be back on my feet and on the golf course in three weeks flat."

In a nutshell, I believe Max's extraordinary survival technique was that he rarely "pictured" himself as ill. He may have bent slightly, but he never broke. Spend 15 minutes with him and you could not help but notice that even at age 93, he attempted to "see" himself in full health, perhaps as he existed in his youth.

The key is that Max never looked back on past unhealthy areas of his life that would bar the healing energy necessary to get well in the present. He rarely recalled images of past illness because he "knew" inwardly that such images, once rooted, will begin to come into being and form an exact likeness in his physical body. He instead searched his memory for positive images of wellness.

Max intensely concentrated on focusing on what he deeply desired, and he reinforced that desire by searching for past experiences that strengthened that desire. He confidently "acted as if" the outcome he envisioned would be brought to future fulfillment. He used the power of each present moment to consciously accept only positive mental images from the past. He then inserted only well-selected images into his mind's reservoir, and from that point forward, the final physical outcome he projected was fully assured. In this manner, he confidently made his body receptive to future wellness. Also, by choosing specific outcome images of both short-term and long-term future events, he made an unqualified positive declaration of fact to his body.

Given all of his various life-threatening illnesses, I guess Max didn't get to age 93 thinking like everyone else -- or by choosing the same mental images that everyone else did.

When I told him that I had cancer, he shrugged his shoulders and said, "Sid, don't die. It's just one of those unfortunate things. You'll get well again, I know it."

I just knew that's what he would say. After all, when you take fate into your own hands and go for the gold, why think otherwise?

In Max's mind, there were no "normal" boundaries of reality, so there were no "miracles," just a natural mind-body connection. At work, as part of his core Self, is Max's simple, remarkably dependable, self-renewal formula: "Thoughts plus the energy of intent, equal physical outcome." In other words, with your thoughts you give life to life.

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Lois Breast Cancer Survivor

It's easy to understand why Lois is an 18-year survivor of breast cancer. Her story is one of a can-do triumph over cancer and illustrates how a stranger greatly affected her life.

"I discovered I had the disease when I went in for a biopsy. Since I was a single mother of two children, my initial reaction was that I would do everything possible to live. I had radiation treatment for six weeks following chemotherapy. When I left the hospital, I immediately began dating and having a good time all the while trying to forget about whether I would be sick. I made it a point to see that my life went on in a normal way and I have been totally positive throughout the years."

Lois met her future husband during her ninth month of chemotherapy. However, it was another person -- a stranger -- who made a big difference. Lois recalled, "Within a few days after my discharge from the hospital, someone came to visit my home. She had been sent by my hospital, whose services include finding role models for its cancer patients and setting up home visits. She looked just like me, had also been a breast cancer patient, and like me, had grown up in Forest Hills, New York. What's more, she also had two children and had been divorced and remarried. It wasn't a mere accident that she was almost a replica of myself -I discovered that the hospital had done this quite intentionally. Here was someone with whom I could immediately relate by example and from whom I learned to have a positive attitude. She was the perfect match. What was amazing was that here I was living in Encino California, and the hospital had gone out of its way to find a 'clone' from Forest Hills, New York."

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Catherine Ovarian Cancer Survivor:

I first met Catherine while I was a patient at the University of Minnesota Hospitals. At that time she had been a 25 year survivor, I had been admitted 14 days after my last chemotherapy session (when immune system function is virtually nonexistent) because of a high temperature.

Catherine, a registered nurse was a member of the oncology staff responsible for intravenously administering the GCSF (Granulated Colony Stimulating Factor) I needed to induce my immune system to fight an infection. On entering my room one evening while I was writing, she hesitantly asked, "What are you working on?"

"A book on how cancer patients survive long term."

"I'm a long-term cancer survivor," she said.

She proceeded to explain that at the age of 21, she learned she had ovarian cancer. Her doctors gave her a 25% chance of survival -- if she could make it through the next two years.

She said, "I was a theater major in Oregon, when during a routine pelvic exam, the doctor noted a cyst. Even though most cysts are benign, the doctor decided to schedule an exploratory operation. After surgery, I was told absolutely nothing. But I did have an idea that something was up when one of the nurses casually remarked, 'You have to live every day to the fullest.'

"Finally, I was informed of my odds of surviving my disease. At that time, only 100 cases of the disease had been recorded, so I'm not certain whether the medical staff knew what could be done. My mother flew out to Oregon and her support was very, very special to me. I never did feel hopeless, probably because from the outset, I had the unwavering support of my mom and other members of my family. For example, my brother constantly cracked jokes about my illness. Some might call this sick humor, but it worked. You see that my family had a secure handle on the disease, and this helped me confront cancer and get through the entire experience." Catherine went on, "Even though the fact that I had cancer at 21 years of age left me numb, 'death' was not a word in my vocabulary. Nor was the word 'hopeless.'"

Back in Minnesota, Catherine immediately started to undergo chemotherapy. After each of the 24 sessions, she vomited. The only anti-nausea drug available at that time was Compazine, which could produce a case of lockjaw as a side effect.

Looking back on this time of her life, Catherine said, "It never once crossed my mind that I would die."

"The problem," she continued, "was that because of the vomiting, I could only work three of four weeks a month. It was apparent that chemo therapy, not me was controlling my life. But once the vomiting subsided, I decided to return to school and take an internship in theater. But I began to wonder whether theater was what I really wanted to do with the rest of my life. I decided that it was not. You see, by this point, my life priorities had changed dramatically. I felt that I needed to help others, and given the political in-fighting ever prevalent in theater, I knew that this was not the area that would satisfy my innermost needs."

In a sense, it was a nurse who unknowingly served as a role model for Catherine. In fact, the words of a virtual stranger gave meaning and purpose to Catherine, and helped her conquer cancer. Catherine explains, "About this time I had a second exploratory operation. A remarkable head nurse on the oncology floor went out of her way to befriend me and we became quite close. When I dropped out of my theater classes, she asked what field I was planning to enter. I told her I had decided to become a registered nurse."

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Claire Breast Cancer Survival

"I was extremely shocked when I learned I had cancer, especially because of the way I received the news," said Claire, a 12-year cancer survivor. "I had gone to the Mayo Clinic for my yearly checkup, including mammography. After the breast exam, I was the only one asked to wait -- so long that I was the only patient left. I remember being annoyed, since my husband and I had already checked out of our hotel.

"Then a doctor called me into his office and told me I should stay and have a biopsy immediately. He was certain that the mammogram indicated breast cancer. He then proceeded to walk out of the room. It was a very traumatic experience."

Claire's biopsy findings were abnormal, and she was scheduled for surgery.

"I had only been married 11 months when this happened," she noted. "Yet my husband was wonderfully supportive. He made me feel whole. Because I was so scared, my husband

suggested that I see a psychiatrist, which I did. While he didn't turn out to be extremely helpful, my husband did. He was simply amazing."

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Gerry

Fibrosarcoma.

Fibrosarcoma is a large, rare and usually fatal inoperable cancer. Gerry was given three months or less to live. Today, Gerry is the nation's longest living survivor of the disease.

It appeared that Gerry was genetically destined to have the disease, as her cousin, brother, and mother had all died of cancer. Her children were also facing dangerous odds, and at the time she was first diagnosed with fibrosarcoma, Jerry's three daughters were 6 1/2, 4 1/2, and 1 1/2 years old. At age 7, her youngest daughter had also developed the disease.

As an early participant in the M.D. Anderson Cancer Hospital and Tumor Clinic experimental high-dose chemotherapy program, Gerry says she remembers throwing up 10 hours a day every 15 minutes (this was before the anti-nausea drug Zofran was available). It is almost impossible to imagine such a debasing set of life circumstances.

The same evening of the day she learned she had no more than 3 months to live, barely able to walk, Gerry began to plan a Halloween party for her three children. She proceeded not only to make dinner for her children and their friends but to plan a neighborhood trick-and-treat outing. The very moment Jerry related that Halloween story, I began to think of Victor Frankl's book, *Man's Search for Meaning* in which he concluded that the only concentration camp inmates who survived were those who had found meaning in their lives. Listening to Gerry, I remembered Frankl's use of this Nietzsche quote: "He who has a why to live can bear with almost any how." I mentioned Frankl's philosophy and background to Gerry. Immediately she took out her notebook to write down the book title and said, "Funny you should mention that, Sid, because one of my doctors did liken my cancer experience to that of a concentration camp inmate." After repeatedly being told that nothing more could be done, Gerry remembers lying in bed, turning to a Higher Power and saying, "I don't give up easily, but I've exhausted all possible options. Now it's strictly up to you." At this time, Gerry's husband vehemently said, "You must accept a chance to preserve your life."

"Immediately," she said, "I felt a calming and peaceful influence envelop me."

In fact, Gerry has come to believe that a power greater than herself restored her to health. "And," she says, "attitude is chiefly a means to execute that power."

Despite the fact the medical community insisted that, biologically, her time had come, she decided to take complete charge of her life. She noted, "I felt that if I turned my life over to a doctor's control, I would simply not survive. I felt I would lose any alternative options for living. And that was not acceptable."

"You see, Sid," she said, "there was incident after incident in which hospital staff made errors that in spite of my strong will to live, could easily have led to my death."

"As for doctors," she continued, "a few were so incredibly cold and detached they rendered people like me hopeless in their hour of greatest need."

Gerry noted that the judicious choice of a physician is indispensable to overcome crisis. She believes a line should not separate the patient-doctor, but should have at its basis a solid patient and doctor connection. Gerry noted that she now selects her physicians on professional merit and

on their inherent capacity to relate to her on an emotional level. She recounts one rather heartless physician who, on chance occasion she still meets, no longer can look her in the eye. Again and again, Gerry emphasized that several hospital staff members and doctors she encountered were so terribly callous and resolute in their thinking that they took on the robe of licensed Judges in rendering life-and-death decisions -- a real burden for cancer patients trying to conquer negative thoughts and expectations.

What I found utterly fascinating was that during our 3-hour conversation, Gerry never once dwelled on the symptoms of her disease. Somehow she has learned to separate herself from her disease. Listening to Gerry, one hears no self-pity, no complaining, no emotional dissipation of energy, and no undue optimism. It's not that she ignores symptoms. But she does not get unreasonably wrapped up in them, so that worrisome thoughts become a hardship and a replica of her every expectation. She has turned her life over to a Higher Power and has no need to dwell on, or reinforce, bodily symptoms.

To demonstrate how a self-determined, dynamic-minded parent can often affect family members' attitudes, remember that Gerry's youngest daughter, Wendy, at age 7, was diagnosed with cancer. Today, at age 26, she is also a self-motivated, take-charge person. Is it any wonder that she, too, has conquered cancer?

"Cancer," said Gerry, "has taught me that life is a gift."

Listening to Gerry, I remembered Victor Frankl's use of another Nietzsche quote: "What doesn't kill you makes you stronger. "

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Amy Chronic Myelogenous Leukemia

When I met 24-year-old Amy at her parents' home, she was leaning back in her wheelchair, a wide grin on her face, wearing a t-shirt that said "Reaching Our Goal: Cure 2000. Leukemia Society of America. "

With unexpected charm and gentle gusto, Amy appeared content. Getting there had not been that easy.

As a 12 year-old, Amy was diagnosed with chronic myelogenous leukemia (CML) -cancer of the blood.

On average, CML remains in chronic phase for 24 to 30 months before it goes into accelerated phase. Since there was no way of knowing the exact date of onset of the cancer, there was no way of knowing when it would accelerate. She decided to wait 2 years after diagnosis, which happened to be too long. Her leukemia had gone into the accelerated phase so the doctors prepared her for a bone marrow transplantation as soon as possible. Once it accelerated, her chance of survival dropped from 50% to 15%. Without a bone marrow transplant, Amy's survival time was estimated to be 3 to 4 years. So a team of physicians contacted the National Bone Marrow Donor Registry in search of a compatible bone marrow donor. The odds of finding a compatible donor were 1 in 500,000.

Against these odds, Amy, at age 14, became the recipient of a bone marrow transplant from an unrelated donor -- a 26-year-old member of the U. S. Navy. The bone marrow transplantation involved 2 days of fatal doses of chemotherapeutic agents, and 4 days of fatal doses of radiation

to kill off her own bone marrow. Then on the eighth day, Amy was given the donor's bone marrow.

Because Amy no longer had much of an immune system, she was placed in isolation for 90 days. There was no effective anti-nausea drug available at the time. She noted, "When I became as sick as I did, I wanted to die." Saddened that her teenage years were taken from her, Amy explained, "Not only was I unbelievably sick all the time, but I was sure no other teenager had to go through the kind of stuff I was going through. I hated and resented the whole thing."

Before the transplant procedure, her mom kept telling her that a positive attitude was important. Amy noted, "I just wanted to forget it! My mom, on the other hand, was a really strong-willed person. She is quiet, but very strong. She stayed with me all day and all night for all but three nights of my 90-day hospital stay! She cleaned up my throw-up, washed my face, listened to me cry. Can you imagine how hard it must be for parents to hear their child say how much she wants to die?"

Then pneumonia developed in one lung -- which is often fatal because the immune system cannot fight off the infection. Amy said, "Everyone, I mean everyone, including my family, thought I would die." When the doctors told her that she might have to go on a respirator, she changed her attitude. She did her breathing exercises every day. And an xray film of her lungs was taken daily. Every day it was a little better, and within a week's time, the pneumonia disappeared. The doctors were amazed that someone with no immune system could get rid of pneumonia in less time than someone who was "normal and healthy." This convinced her how important a positive attitude really was. She conceded, "Mom had been right all along. I just had to go through it to really understand."

Amy explained that after her transplant, she suffered a whole host of terrible side-effects and complications. For example, she contracted chickenpox, which not only covered her body but appeared in her throat, esophagus, stomach, and intestines -- as well as shingles (the next stage of chickenpox) in a nerve in her lower back. Because of extreme back pain, she could barely walk for the next 12 months. She noted that for her, this was "a set of circumstances almost too impossible to deal with, all happening to a teenager who wanted only to be like everyone else her age."

Amy added, "I hated every minute of the disease and I was mad most of the time. Angry really and I'm sure, very difficult to be around. Most likely, this was why I lost all of my friends. Just as I didn't understand why a positive attitude was so important to live, they didn't understand a life-and-death crisis without experiencing it. They just didn't couldn't understand what I went through. I just wanted someone to listen, to understand."

Moving forward in her wheelchair, Amy went on to say, "Later, because of the transplant, I had partial rejection in my liver and I was put on a medication that, in some cases, can cause avascular necrosis (bone decay), which took place three years later. My hips decayed and were replaced in 1990. For a 24-month period, she was given pain pills and her body became addicted to them. Because of her medical history, the doctors felt that discontinuing them "cold turkey" would cause other problems, so she was weaned off the pills over a 6-month period. During this time, she experienced withdrawal symptoms. From this experience, she feels that she can relate to those who were addicted, both physically and mentally, to drugs and to those who experienced drug withdrawal symptoms. Three years after Amy's bone marrow transplantation, things got worse when Hepatitis C developed. This was treated with a drug that caused polymyositis (inflammation of many muscles), which left her unable to move for a year.

Amy continued, "I could no longer relate to the kids in my class. Their interests were partying, drinking, smoking, and having a good time. Certainly not my interests at all. We simply could not identify with one another. As a result, I lost all of my friends. But my faith in Jesus Christ became that much stronger. He was my security, I drew my strength from Him."

Amy said that at the time of her illness, there were no support groups. Nor were there people with whom she could share her plight. She said, "I would have loved to meet people who had made it, people I could have looked to for a helping hand. I really am fortunate, though, that I have parents who were there at every critical turn. As a teenager I didn't realize how really important this was. Now, of course, I do."

When Amy's muscle disease became full-blown and she was no longer able to walk, she began to use a wheelchair. Over the past 6 years, she has received physical therapy and has progressed to a point where, using specially adapted straps, she can now pull her wheelchair into her car by herself. Her car is specially adapted with hand controls and low-effort steering.

From October 1991 to September 1992, Amy, certain she could make it in the real world, attended business college to become a legal secretary. From October 1992 to February 1995 she worked as a legal secretary at two different law firms. Because of continued poor health, she was unable to work in an environment that sometimes demanded 12-hour days.

In 1992, Amy started to attend a church in her immediate area that offered her a number of opportunities to meet supportive people. She has found that she can help recovering substance abusers. She can relate to them because of the circumstances surrounding her 24-month period on pain medications and the subsequent period of drug withdrawal treatment.

She recalled an earlier time when she was unable to help others. "I remember only too well another transplant recipient, a teenager going through the same ordeal as me. It was all so fresh for me, I didn't know what to say. But I couldn't help but notice that she had just given up. All I had to do was look in her eyes and I just knew she'd made a decision to die. And that, of course, is exactly what happened. Know what? I'm different now. Now I know what to say to help people like that."

Amy continued, "I would love to help people become more aware of cancer and what they can do to help themselves. I would especially love to help teenagers undergoing bone marrow transplantation since in my day, there was so little available in the way of support groups. Also, I would very much like to be a model for others who can look at me and say, 'She made it. She knows what I'm going through and exactly how I feel! Here's a person just like me, who can help share my ordeal, so I don't have to go through this by myself.'"

Amy explained her future goals this way: "What I want to do is to share my experience with others who can benefit. For that reason, I would like to talk to teenagers and young adults -- to share my experiences, like getting a driver's license at age 16, reaching age 21, and who knows, even getting married! I want to help these young people look forward to reaching each milestone of their life, and even help them devise solutions to become more independent. I would like to help them look to the future with hope."

Amy continues to go to physical therapy to regain strength and improve the range of motion in her legs. "I continue to struggle with my health," she said, but it doesn't get me down. My present goal is simply to be as independent as possible."

Amy made it clear that to gain independence over her physical circumstances will give her certain control over her mind and her body. To increase that independence, Amy is about to be assigned a "service dog" through the "Canine Companions for Independence" program. She explained that a service dog is trained in more than 50 commands to help people like her who

have fatigue syndrome. "My dog can pull a wheelchair, turn light switches on and off, retrieve items dropped on the floor, help me navigate, go to shopping malls and ride up steep ramps. My dog will not be 'just a service dog' but my closest companion. It will allow me to go places by myself and not have to worry if I get too tired to roll the wheelchair."

When I asked Amy what lessons she has learned from her cancer experience, she responded, "Well, during the transplant period, I really learned to appreciate the smallest things in life, like a colored leaf. Or a drink out of a pop can instead of a Styrofoam, hospital-issue cup! Even now I enjoy the little things. Really, I've learned how important it is to take time to stop and smell the roses."

"Looking back on it all," Amy said, "I do believe there is purpose in life as well as a reason for everything--and that God has a plan for me as well as for others. I also believe that a person's attitude is so very important to survival, and, of course, that it is important not to give up and to live one day at a time."

Survival Tip 5:

Faith is not something that can be taught and learned in the way that many tips in this book can be. However, faith can be examined. Many of you already have a well-grounded faith, whereas others of you are not convinced. Whatever your orientation, take the time to really think about this issue and to consider that other realities do exist.

I myself was on such a quest. During my search to gain further spiritual growth, I attended a meeting featuring Elisabeth Kubler Ross, MD, as the guest speaker. It was a spellbinding experience showing a full agreement between inner perception and observed fact.

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Cindy

Rhabdomyosarcoma, or cancer of the muscle.

It was during another interview that I was given an Austin Post article entitled "*Cindy's Christmas, a Medical Miracle*." Here paraphrased from the article is the description of Cindy's "medical miracle":

By all medical criteria, Cindy should have celebrated her last Christmas 6 years ago, but Cindy defied all scientific odds and refused to die.

At one point, her muscles were so filled with malignant cells and her body so racked with pain that no doctor who consulted on her case thought she had a chance.

"One day she was fine -- her usual, energetic self, then suddenly, she was limping and had some slight pains," recalls Cindy's mother.

Three physicians had examined the little girl before one found a very tiny lump in her stomach. A surgeon operated that night, and after 7 hours in surgery, he told her mother the bad news. Cindy was a victim of rhabdomyosarcoma, or cancer of the muscle. Her disease had spread so quickly and was so complicated at the time of the surgery that, according to her surgeon, there was little else that could be done to arrest it.

"We were prepared for the worst before we had any time to even hope for the best. I was stunned by it all and, looking back, I think I stayed in some kind of shock for months," Cindy's mother says now.

Cindy's stubborn will to live was obvious in the way she recovered from surgery. After almost a month she was strong enough for her mother to bring her to Houston where she was referred to the University of Texas M.D. Anderson Hospital and Tumor Institute.

Cindy's mother recalled, "We saw a lot of doctors that first time -- but they all said the same thing: 'There is nothing we can do.' So we returned to Austin, and "I prayed hard that she'd go quickly without having to suffer any more."

But one of the Houston doctors called Cindy's mother a few days later and asked that she bring Cindy back. He and his colleagues wanted to try a very rigorous course of chemotherapy. If Cindy could hold out for perhaps a month, well, perhaps .

Cindy's mother showed me a picture of Cindy taken during her course of treatment. The pitifully frail, almost bald child bears no resemblance to the pretty, precocious girl who, that Monday, was renewing friendships with M.D. Anderson hospital doctors, nurses and laboratory personnel during a routine checkup.

Cindy literally lived at death's door for several weeks. Her stomach swelled like a pregnant woman's and her hair came out because of the drugs. The cancer was in her bones, in her spine.

"Just everywhere," one pediatrician recalls.

As Cindy's mother tried to live each day one at a time, she learned the meaning of the words "hope" and "love."

"One day Cindy told me not to be afraid because she wasn't scared of dying. I knew then I really did have hope and I realized how much love we shared," she said.

Seven weeks after the strenuous drug regimen was initiated, in which Cindy received a combination of chemical agents, she was able to return to Austin. The M.D. Anderson Hospital staff was cautious, "because we couldn't believe she'd lasted that long," her pediatrician said.

One day at a time became the family philosophy.

For two years, Cindy took more drugs, but to date, her Houston doctors haven't found any clinical signs of cancer.

"Medically, we think she's cured and hers is the worst case of rhabdomyosarcoma we know of that has not ended in death. Other children with less involved disease are living longer and longer, but Cindy is a real shining star," her pediatrician explained.

To which Cindy's mother adds, "If I have just one small message to share with other mothers --or with anyone really -- it's to never give up hope no matter how hopeless the situation seems."

And Cindy matter-of-factly says, "I love to live."

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Anita

Breast Cancer Survivor:

Anita said that a physician had "watched" a lump on her breast until it was nearly too late, which was troubling since her sister had died of breast cancer. After diagnosis, she thought, "Well, this is it. I'd best get my affairs in order."

After her first chemotherapy session, however, when she experienced none of the expected side effects, she discovered that she was no longer frightened of cancer or the treatments. She said, "It

was at that point that I decided to pretend the disease wasn't so and to `live one day at a time.' I decided to carry on a normal existence."

Anita used no visualization, decided against regulating her diet, and saw no visions -but she recovered because of her uncanny ability to "pretend" and "act as if" the cancer was no longer present. She does not deny that she had cancer. She has just decided to pretend that nothing is wrong with her. By turning her healing over to her unconscious, Anita discovered that healing automatically took place.

Anita said, "As best I can, I simply ignore the disease and go about life. I simply do not dwell on it."

Other things also helped Anita recover. She says that she had a close family that helped her greatly. Also, she believes that she was just lucky. Had the medical treatment she received been available to her sister, perhaps she, too would have lived.

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Millie

Pancreatic Cancer Survivor

Millie's amazing recovery is the result of her reliance on two survival techniques: One, she believed and expected she would survive. Two, she took charge of her own medical journey. Her example illustrates the importance of taking both conventional and alternative medical interventions seriously.

Millie has survived pancreatic cancer, a dreaded disease that few live to talk about. It all started like this: More than eight years ago, she visited her gynecologist because her stomach felt bloated. After a series of tests, her physician said, "Something is going on here, Millie. Perhaps it would be best if you had a Sonogram. "When the Sonogram showed abnormalities, she was referred for a Catscan. When Catscan revealed no abnormality, both Millie and her husband, Leonard, who is a physician, were elated.

Two to 3 months later, however, while Millie and her daughter were working at the gallery they own, her daughter said, "Mom, you look kind of orange."

"I took a hard look at myself," said Millie, and in contrast to my granddaughter, who was standing nearby, I was bright orange."

Alarmed, Millie proceeded to visit a doctor whose office was near to the gallery. His expression and simple statement said it all. He asked her, "Do you want to go to the hospital now or tomorrow morning?"

"I went in immediately," Millie said, "and the hospital staff quickly conducted a number of tests for pancreatic cancer -- everything short of biopsy. I then met with an oncologist who assured me and my husband that he practiced state-of-the-art medicine. Then I visited a leading surgeon who did exploratory surgery to determine the extent of my problem. The next thing I remember was waking up in the intensive care unit and seeing my surgeon who was seated alongside my bed, with tears in his eyes."

Aghast, I asked him, "What's wrong? Am I going to die?"

He replied, "I did everything I could in the seven hours you were on the operating table. I removed your gall bladder and spleen, I did a double stomach bypass but I was not able to remove the tumor. I'm sorry to say that this was not a life-saving operation."

When she was well enough, Millie left the hospital and again visited her oncologist. He recommended she begin a series of 28 radiation treatments and chemotherapy sessions which continued over the next 17 months. (Amazingly, throughout all those treatments, she never lost her hair.) From that day forward, Millie noted, "It seemed as if every doctor I visited gave me 6 months or less to live."

She went on, "Following my hospital stay, I had a terrible pain in my right shoulder. The first thing I did was to ask Len what he thought might relieve it. He's not only a physician but a national expert on total fitness, as well as the inventor of Heavy-Hands® weights and the author of The HeavyHands® Walking Book. He suggested a hot shower. Unfortunately, this gave me only temporary relief. Next, he advised that I exercise with weights in a swimming pool, which proved to be of immediate and immense help. Len also saw to it that I ate properly and repeatedly emphasized that if I allowed myself to become undernourished, I could go downhill rapidly. He literally babied me, and his nurturing support played a key role in my recovery. He was fantastic, as were my daughters and friends.

"During this period," Millie recalled, "I did think about dying, but I felt I just wasn't ready. I was 62 years old and still had a lot of living to do. One evening I decided to take a long walk. During that walk, I remember distinctly saying to myself, 'I'm not going to die of this disease. I'm not going to give up.' This was truly a life-defining moment for me. I believe this rather bold decision was instrumental in saving my life.

"Sometime afterward," Millie said, "my husband and I decided we wanted a second opinion so we visited the University of Pittsburgh Cancer Institute. Would you believe that after examining me, one doctor had the gall to tell my husband, 'Don't bother to get any life insurance on your wife. She has about 3 months to live.' Needless to say, that statement really unnerved both Len and me. It was uncalled for."

"Shortly after that visit, something else happened that really disturbed me," continued Millie.

"Michael Landon, the TV star, was stricken with pancreatic cancer. Even though he dramatically altered his diet and was into taking all sorts of alternative nutritional supplements, he still died. When I learned of his death, I said to myself, 'Well, that shoots holes in that theory.'

"Then out of the blue one day, my daughter called to say that while reading the morning newspaper, she had come across an article about a researcher with a patent pending on a cure for cancer. Len immediately checked him out and, satisfied, got in touch with him. It turned out that Clarence Cone is a well-respected biochemist who had once worked for NASA. My husband sent for Dr. Cone's patent, extensively reviewed the material, and told me to give the treatment a try. He said he didn't think it could hurt me.

"With that decision," Millie continued, "I began Clarence Cone's cancer treatment (United States Patent Number 4,935,450, dated June 19, 1990). It consisted of a daily injection of Lente insulin, a thyroid prescription and a nonprescription dietary supplement called Quercetin. For a solid year, I adhered to a strict diet regimen of almost zero fat and zero protein. Very slowly, the results of my lab tests began to improve. Today, there is no evidence whatsoever of pancreatic cancer in my body.

"It seems ironic but some people believe that I never had pancreatic cancer. I suppose it's because so few survive the disease. Since their skepticism bothered me no end, I called my surgeon and asked if this was at all possible? He said, 'I don't care what anyone says. I held the tumor in my hand and know full well that I couldn't remove any of it.'"

"To put it bluntly," noted Millie, "too many of the physicians I have encountered since my cure are totally unwilling to talk about or even seek an explanation for my recovery. They actually move away from me when they discover I had pancreatic cancer.

Presently, I do volunteer work at Good Samaritan Hospital here in Florida. At first, I found working with cancer patients very depressing . I must confess that their knowing that I am a long-term survivor gave them hope, but when one of them passed away, I questioned whether it was right to instill these patients with hope. Once I resolved that issue for myself, I began to feel good about what I do and realized that I'm performing a worthwhile service."

Millie further noted, "I learned a great deal as a result of my bout with cancer. I discovered how much I value the love and support of my family. I also became more appreciative of what life is all about. Before my cancer was diagnosed, I was frequently occupied with my work either as the co-owner of the gallery or as an interior designer. To be honest, I seldom paused to think about life. Now, however, I am far more thoughtful. Cancer will do that, you know. It makes you stop and think. What's more, I believe the entire ordeal was a unifying experience for my family.

"Incidentally," Millie continued, "during my illness, I was also into meditation and yoga and saw a psychiatrist regularly. As a matter of fact, I remember having had a 10-minute session with a hands-on healer, who probably feels that he was instrumental in my cure.

"Strange things happen. I had a close friend whose husband died of cancer, and sadly, several months later, her physician told her that she too, had the disease. She did little or nothing to nourish herself. properly and was convinced she would die soon and that she belonged in a hospice. Although I tried, I simply couldn't talk her out of her negative mindset. Several days after entering a hospice, she passed away.

"I attended several support groups during my bout with cancer. That valuable experience taught me there are two types of people in the world: Those who are sure they are going to die--and do--and those who are sure they are going to live--and do

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Phyllis Landman Gorlin's Syndrome (Basal Carcinoma Nevus Syndrome)

Phyllis Landman is a soft-spoken, highly articulate and intelligent woman with a calming demeanor. Mainstream rather than complementary medicine oriented, she said that her physician has explained that at the present time there is no cure for her type of cancer. Phyllis said, "I get tumors, have them removed and then I get them again, not necessarily in the same location." Perfectly mirroring conventional medicine's approach, Phyllis emphasized that she has been told that the causal agent of her cancer is a gene mutation and that "down the road, perhaps in five or six years, researchers may come up with a cure."

"Well," I answered Phyllis, "normally when I talk to someone who I feel has a firm belief and I want to discuss a subject outside the boundaries of their normal thinking process, the first question I ask is, ' Can you suspend your core beliefs for the next few minutes while I discuss my personal experiences with long-term survivors?' Normally you would think most people would be polite and answer, "Yes I can!" Yet, what I've found is just the opposite. People are quite candid and will admit this is a very difficult thing to do. That's why I was a bit surprised when Phyllis said, "Yes, I believe I can."

With that answer, I went on to tell to Phyllis my personal findings of how countless long-term survivors found themselves in somewhat the same situation as she but were able to find an "impossible" cure. I also went on to tell her about several physicians, of late, who are clairvoyant and are able to heal by "seeing" fields of energy, an Eastern philosophy mind-body-spirit holistic approach. The idea is that by releasing specific emotional energies they can bring about cures by helping patients to heal themselves.

Phyllis somewhat agreed, saying her mother had been told that she had at most only six months to live. Yet at 81, she lived two years longer than medical science had predicted. The reason, Phyllis said, is that her mother had confided in her doctor that she had certain goals she had to meet before she was ready to die. One goal was to attend her oldest grandson's graduation from medical school, the other to see her youngest grandson's bar mitzvah. Phyllis believes that in spite of the doctor's prognosis, her Mother's goals to see those events to fruition lengthened her life.

For the past 19 years, Phyllis has had Gorlin's Syndrome, otherwise known as Basal Carcinoma Nevus Syndrome. "I uncovered the disease when I discovered a series of small bumps on my eyelids." She then hastened to make an appointment with a physician who after treating her said, "It's no big deal," making derision of Hippocrates' admonition: "First, do no harm."

"The bumps failed to go away," said Phyllis, "so I decided to visit another doctor who knew enough to know that what I had wasn't in his area of expertise. He suggested that I see a dermatologist who then proceeded to biopsy the suspicious area."

"I remember," said Phyllis, "doing a lot of research on my condition in order to find the best possible surgeon available to remove the cancerous areas. I had the surgery performed as an outpatient and remember the surgeon saying, 'I didn't get it all, but if I go further into the area, I'll need to perform reconstructive surgery on your right eyelid.'

"What made this period particularly difficult," said Phyllis, "is that I was not only .dealing with cancer but the reconstruction of my right eyelid, which I saw as a much larger issue, since, to my knowledge, I didn't have cancer anywhere else in my body. Because of this mindset, I was able somehow to put cancer on the back burner while I underwent the reconstruction of my eyelid.

"With the eyelid reconstruction behind me, I began to research the medical literature on Gorlin's Syndrome through the Cancer Hot Line and the University of Minnesota medical library. I also began to investigate other patients with the same disease, not a simple task since I did not have access to computers at this time. It was largely through this means that I discovered a leading plastic surgeon to perform my eyelid reconstruction.

In the process of her investigation, Phyllis learned that 1 in 100,000 have Gorlin's Syndrome, which in her case has accelerated over the past 18 years. "It's not unusual," she said, "for me to have a dozen tiny 'bumps' at any given time."

"In the past," said Phyllis, "I've tried a number of therapies, such as laser, surgery and drugs. Of course, most skin cancer, which I have, is not terminal, which is why I don't think of myself as having a condition like brain cancer. This is the reason that I believe that if you have cancer, you're either somehow cured and go on living, and if not, you'll die."

"I believe that it is very important to question everything a physician says and to take full charge of your own healing journey. However, this too can be carried to an extreme."

Noting that there is always something on the horizon that may work, Phyllis said, " One day, I saw my physician on television explaining that he was carrying out a closely controlled study using Interferon as a treatment to combat cancer. I decided to call and see if I could become a member of the experimental study. Even though the study had ended, I still make it a practice to

see my dermatologist every month or two. It's a good thing I do. Last week I had 19 'bumps' removed in one day. These days it seems that I see my dermatologist more than my good friends. Fortunately I live near his office."

Phyllis went on to explain that her mother, brother and father died of some form of cancer. Only her sister was untouched by the disease. Oddly, prior to her mother, no one in the family had the disease.

Asked the lessons she has learned during the past 18 years in her bout with cancer, she responded, "Life is not a dress rehearsal. Of course I hope I've got another 25 to 30 years or more remaining. Certainly cancer has made me think more about what I really want to do with my life. Because one never does know, I didn't want to wait any longer to buy a home in Arizona.

With a raised eyebrow, Phyllis said, "I've also been thinking how I would like my life to end. I think of my mother who died at 83. What's wonderful is that she lived independently with all of her mental faculties intact until the last few days of her life. What's even more incredible is that she was able to retain her marvelous sense of humor. That's the way I'd like to go. My brother had an engaging sense of humor almost to the end as well. Although he could not verbally communicate with any of us for the last month of his life, still he was alert and we felt he could understand us. That must have been torture for him because he was so articulate and also had such a wonderful sense of humor."

Asked if she has an altered spiritual or religious perspective because of her cancer experience, Phyllis replied, "Throughout my life I have been very grounded and more into the 'here' than into the 'hereafter.' I see a certain finality to life because no one has ever come back. Yet I'm not 100-percent certain this is absolutely true. I remember a television program where the interviewer asked people, 'If there is a heaven, what would you like to hear God say?' I believe it was Jessica Lange who replied, "Your father is here, your mother is here and your dog Spot is here too!" I'd like to believe that, but I'm not at that point."

A guiding principle of Phyllis' life is that she is an eternal optimist. She said, "I've noticed that many patients with illnesses who are "woe is me" types seem to focus almost entirely on themselves. Almost as if they're listening constantly to the blood running through their veins. These people, in my opinion, are simply accelerating their death.

Phyllis went on, "Because I had my first operation at four months of age, it's hard for me to sympathize with the "woe is me" types who expend their energies on worst-case scenarios. You see, I was born with a cleft pallet and a hairlip. So from birth on, I've been coping with illness. Cancer has been a part of my human evolution. Looking back, the great thing about my parents is that they did everything in the world to build up my selfworth. Repeatedly they told me that no matter the obstacle, I could overcome it. The reason they said is, because 'you're so smart.' So whatever problems I face in life, this is the exceptional mindset I'm very much committed to."

"The thing is, I have very few emotional let downs," said Phyllis. "By my very nature, I'm a positive person. For example, I recall when my brother was dying. That two year period was tough for all of us. He was in his 40s at the time and both my sister and I wanted to do whatever we could to inform him of effective and promising therapies. In order to function normally at this time, I had to separate myself from the emotional aspects of the situation. Fortunately I have a wonderful ability to put things in boxes. For example, I can take something I have to do and quite literally put something else I was doing aside, like in a box, and often not even take it off the shelf. In other words, somehow I'm able to naturally prioritize situations. It's like the time I had to first deal with my eyelid reconstruction and so I put the idea of cancer aside, in a box, so to speak. Or when my father was dying, I had to put something else in a box and deal directly

with his death. Fortunately I'm able to deal with things one at a time. This ability makes it easier for me to get through each day.

"What I found particularly fascinating, was that even though my brother knew he was going to die, he carried on his daily work schedule and his full obligations as a parent.

In regard to our interview, Phyllis made a valid point in my attempt to find neat healing commonalities--conceivably an investigator bias--for the majority of long-term cancer survivors. She said, "Your study of long-term survivors is really important. But it might be equally important to do a study of people who really tried very hard to survive but didn't make it. Of course, in any case you would probably not know what went on in a patient's mind, since you would be getting the information second-hand."

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