AFTER A CANCER DIAGNOSIS: WHAT’S NEXT?

DON’T IGNORE UTI SYMPTOMS

NEW CONSIDERATIONS FOR DAILY ASPIRIN USE
During your first meeting with your oncologist, you might have a million questions, or maybe you’re not even sure where to begin.

“Almost everybody is overwhelmed at that point, so they can only process so much information. Those are normal feelings and emotions,” said Peggy Malone, an oncology nurse navigator for OSF HealthCare.

Understanding your diagnosis
One of the most important conversations to have early on with your oncologist is about your specific cancer. Things to discuss include:
• Where the cancer is inside your body
• How the location impacts treatment
• What kind of cancer you have
• Other personal factors that could affect your treatment plan

Information, information, information
Education is a major focus, especially in the period immediately following a cancer diagnosis. You may notice that your providers repeatedly give you this information. That’s because they know it can be difficult to absorb information when you’re under stress.

You may have a nurse navigator, like Peggy, attend appointments with you.
How can you support someone who has cancer?

When someone close to you receives a cancer diagnosis, the news can hit hard. Cancer is frightening — for both those getting the diagnosis and the people who love them.

You want to support your loved one. But how do you do that? What can you say or do to show your loved one what they mean to you as they battle cancer?

Advice on offering support
“Everyone’s case is different,” said Jozie Allen, LCSW, who specializes in counseling cancer patients for OSF HealthCare. “How they handle stress and illness is so specific to them,” Jozie continued. “We can’t assume what would be best. We have to be honest with ourselves that we might not know how to help them, even if it’s our spouse.” The first step is to ask questions.

Some suggestions:
• Open the conversation but let the person with the diagnosis take the lead. Don’t start by saying you’ll do this or that. Ask, “How can I help you? What can I do for you?”
• Know that what they need may change at any point in treatment. So, keep asking these questions.
• Ask before doing something like bringing a meal. You might have a good idea, but because of treatment the person may not be able to enjoy it due to food restrictions or nausea.
• Don’t automatically think everything needs an action or a response. Sometimes just listening or being present is enough.
• Understand that constant positive responses to lighten the mood can backfire. Your loved one needs to have their fear and sadness validated.
• Follow through with what you say you will do. They don’t want to be a burden, so make it clear they’re not, and engage with what you offered to do with or for them.
• Be yourself when it comes to your interaction with them. They don’t want others to feel sorry for them.
• Maintain normalcy. Suggest doing some of the regular activities you may have done together, whether going to lunch or having a game night.
If you’ve had a urinary tract infection (UTI), you may recall the unpleasant symptoms: a burning sensation when urinating, sudden and frequent urges to go, pain in your lower abdomen or blood in your urine. But these symptoms may be less intense or not as noticeable in older adults, especially for those who experience occasional leakage.

“Confusion is also a big indicator that a UTI may be developing in elderly patients,” said Sarah Overton, RN, chief nursing officer and vice president of clinical services for OSF Medical Group. “It’s one of the first things we investigate, especially in those with chronic health issues.”

One of the fastest ways to get help for a UTI is with a nurse clinic visit at your OSF HealthCare provider’s office. Nurses can quickly test a urine sample and start treatment if the test is positive.

“Nurses can prescribe antibiotics through a standing order issued by the physician or advanced practice provider,” said Sarah Overton, RN, chief nursing officer and vice president of clinical services for OSF Medical Group. “Often, we send urine samples to a lab for further analysis to identify the strain of bacteria. Your doctor may use this information to modify the antibiotic prescription if your symptoms are not subsiding within a day or two.”

A nurse clinic visit is especially beneficial for older adults who are otherwise healthy or do not have frequent infections. However, if your issues are more complex, your provider will help.

“We work as a team with physicians and advanced practice providers, and are dedicated to providing compassionate high-quality care,” Sarah said. “Nurses are skilled in providing patient education, so bring your questions.”

Nurse clinic visits can also be helpful for conditions like asthma, COPD or a sore throat.

It’s essential to identify and treat UTIs quickly, not only to relieve symptoms but also to prevent them from spreading to other areas of the body and avoid hospitalizations. For example, a UTI in the urethra or bladder can move upstream and cause a kidney infection. This may be more painful and lead to serious health issues such as high blood pressure and kidney failure. Left untreated, UTIs can ultimately spread to the bloodstream and become sepsis, a life-threatening immune response throughout the body in response to infection.

“How a UTI occurs

“Most UTIs are caused by E. coli bacteria, which is naturally present in the body,” said Mirza Ali Khan, MD, a family medicine physician with OSF Medical Group. “If the bacteria get into the urinary tract or the bladder, they can start growing and eventually become a UTI.”
A risk for women and men

A UTI can occur in both women and men. Women are more likely to contract a UTI because of their anatomy. Dr. Khan stressed the importance of women wiping from front to back when using the bathroom to reduce the risk of spreading bacteria from the anus, where bacteria commonly live, to the urethra. “Women have a shorter urethra than men, so the bacteria have a shorter distance to travel to reach the bladder,” he said.

In men, UTIs are more often caused by structural issues, such as a narrow passageway for urine or a blockage due to kidney stones. “Anything that causes the urine to become stagnant and introduces bacteria that shouldn’t be there puts you at risk of developing a UTI,” Dr. Khan said.

Preventing and treating UTIs

To prevent UTIs, it’s important to keep the area dry. Sarah said she sees quite a few infections in older men and women who wear undergarments to protect their clothes from dribbling. The key is to change undergarments once damp.

Also, drink plenty of fluids and empty your bladder frequently. Remember to wipe from front to back.

When it comes to treatment, listen to your body. If you notice any symptoms, make an appointment to see your provider or book a nurse clinic visit.

Antibiotics usually clear up UTIs within three to five days. Left untreated, though, UTIs can lead to serious health issues and hospitalizations.

SCHEDULE A NURSE CLINIC VISIT

If you or your loved one are experiencing UTI symptoms, call your provider’s office to make an appointment for a nurse clinic visit. Same-day or next-day appointments are often available.
ADULTS AGES 60 AND OLDER MAY FACE NEW ASPIRIN RECOMMENDATIONS

Risk of daily use may outweigh benefits

For decades, a daily regimen of low-dose, or baby, aspirin was recommended for adults as a way to keep heart attacks and strokes at bay.

Aspirin not only relieves pain but also contains anti-inflammatory properties and acts as a blood thinner to prevent clots. The U.S. Preventive Services Task Force (USPSTF), an independent, nonfederal, volunteer group of national experts in prevention and evidence-based medicine, has now proposed a notable change on that recommendation.

Data indicates the risk for internal bleeding from taking the over-the-counter drug daily as a primary prevention method for cardiovascular disease and stroke might outweigh the benefits for adults ages 60 and older who’ve never had a heart attack or stroke.

Primary vs. secondary prevention

“‘That’s called primary prevention. They’ve got risk factors, and we don’t want that first heart attack,’” said Darrel Gumm, MD, a cardiologist and vice president with OSF HealthCare Cardiovascular Institute.

BRAINY PASTIMES

Give this sudoku puzzle a try! The object is to fill all empty squares so that the numbers 1 to 9 appear exactly once in each row, column and 3x3 box. See the back cover for answers.

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Evolving science and guidance

While the task force’s guidelines are new, the research is not, Dr. Gumm said. Recommendations and guidelines often change as scientists and physicians continue their studies.

“The fact is, as science progresses, we learn more. We understand how to better treat patients. And so, it ultimately comes back to a risk-benefit ratio,” he said.

Talk with your provider

Mark Meeker, DO, an internal medicine physician and vice president of Community Medicine at OSF HealthCare, advises high-risk patients who haven’t had a heart attack to talk with their provider before starting an aspirin regimen.

He warns not to start or stop any medication, even something as simple as a low-dose aspirin, without first consulting with your provider.

“Your provider will talk with you and will recommend individualized care that’s best for you,” Dr. Meeker said. “Talk to your doctor, and don’t do these things on your own.”

Ingredients

- Cooking spray
- 3 cups frozen diced breakfast potatoes
- ½ cup grated Parmesan
- 1 ½ cups chopped mushrooms
- 1 ½ cups chopped tomato
- ½ medium onion, finely diced
- 3.5-ounce package reduced-fat feta cheese
- 10 ounces frozen chopped spinach, defrosted with liquid squeezed out
- 15-ounce container egg substitute, any flavor
- ½ cup skim milk
- 1 tsp. garlic powder
- ½ tsp. black pepper
- 1 tsp. ground mustard
- Pinch nutmeg

Directions

1. Preheat oven to 400 degrees.
2. Spray 9” x 13” baking pan with cooking spray.
3. Layer potatoes, Parmesan, mushrooms, tomato, onion, feta and spinach, one on top of the other, in the bottom of the baking pan.
4. In a small bowl whisk egg substitute, milk and seasonings. Pour over vegetables and shake pan to evenly distribute.
5. Bake for 40–45 minutes. Let sit for 5–10 minutes before cutting into eight pieces and serving.

Serves eight; serving size is one piece.

Each serving provides: 147 calories, 4 g total fat (2 g saturated fat), 487 mg sodium, 15 g total carbohydrates, 2 g dietary fiber, 13 g protein.
Solution to puzzle on page 6

6 4 8 5 2 9 3 1 7
9 1 5 3 7 4 2 6 8
7 2 3 1 6 8 4 9 5
3 5 4 6 8 7 1 2 9
8 7 6 2 9 1 5 3 4
1 9 2 4 3 5 7 8 6
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