



## EMPLOYEE SPOTLIGHT

### Lawanna Beyer, RN/OCN

If you overhear Chemo Nurse Lawanna Beyer talking about Larry, Curly, or Moe it's not what you may expect! Those are the names of her 3 alpacas, in addition to the many other animals she hosts at her home in Alachua. (including dogs, cats, rabbits, chickens, turkeys, horses and a pigmy goat!) Lawanna's responsibilities range from chemotherapy administration to care planning with our Physicians and other staff. Lawanna attended Nursing School in Boston before moving to Florida. She has been married to Rick for 25 years and she has 2 children, a stepson and 2 grandchildren. Lawanna has been caring for patients at CCCNF for over 6 years.



### Every 3rd Tuesday of the Month, 6-7:30pm

The CCCNF CancerHome Support Forum meets every third Tuesday of the month from 6:00 pm- 7:30 pm at The Community Cancer Center of Gainesville located at 7000 NW 11th Place, Gainesville, FL 32605. Call 352-331-0900 for more information.



## MARCH IS NATIONAL COLORECTAL CANCER AWARENESS MONTH

Colorectal cancer (cancer of the colon and rectum) is the second leading cause of cancer-related deaths in the United States. March is National Colorectal Cancer Awareness Month, so it's a good time to learn more about colorectal cancer and how it can be prevented or best treated.

According to the American Cancer Society, almost 150,000 new cases of colorectal cancer were diagnosed last year. Despite these statistics, colorectal cancer is unique in that it is highly preventable and can be detected early through proper screening. Between 80-90% of colorectal cancer patients are restored to normal health if their cancer is detected and treated at the earliest stages. March is National Colorectal Cancer Awareness Month, so it's a good time to learn more about colorectal cancer and how it can be prevented and/or detected early.

### How can colorectal cancer be prevented?

Most colorectal cancers begin as a polyp, which is a tissue growth that starts in the lining of the colon or rectum. Identifying and removing a polyp early in its development may prevent it from becoming cancerous.

### What screening methods are used to detect polyps and/or colorectal cancer?

Current screening methods include fecal occult blood testing (a simple chemical test that can detect hidden blood in the stool), flexible sigmoidoscopy (a visual examination of the rectum and lower portion of the colon, performed in a doctor's office), and colonoscopy (a visual examination of the entire colon).

## When should I get screened?

The risk of developing colorectal cancer increases with age. Men and women aged 50 and older are at an increased risk for developing colorectal cancer and should be screened at least every 5-10 years. Some people are at a higher risk and should be screened at an age younger than 50, including those with a personal or family history of inflammatory bowel disease, colorectal cancer or polyps. Ask your healthcare provider which screening procedure is right for you and how often you should be screened.

## Is screening covered by insurance?

Colorectal cancer screening costs are covered by Medicare and most commercial health insurance plans, usually starting at age 50 for the most common tests. They may be covered earlier for patients who are at high-risk.

## What are the symptoms of colorectal cancer?

Colorectal cancer often has no symptoms until the disease has progressed beyond its earliest stages. Be certain to notify your physician if you are experiencing any of the following potential signs or symptoms:

- A change in bowel habits such as diarrhea, constipation, or narrowing of the stool that lasts for more than a few days
- A feeling that you need to have a bowel movement that doesn't go away after doing so
- Rectal bleeding, dark stools, or blood in the stool
- Cramping or stomach pain
- Weakness and tiredness

## How can I lower my risk?

To lower your risk of colorectal cancer, the American Society of Colon and Rectal Surgeons recommends that you:

- Get regular colorectal cancer screenings beginning at age 50.
- Eat a low-fat, high-fiber diet.
- If you use alcohol, drink only in moderation.
- If you use tobacco, quit.
- Exercise for at least 20 minutes 3 to 4 days each week.

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Healthy Connections is a publication of Community Cancer Center of North Florida and is published for the general public to disseminate health-related information. This information is not to be used for diagnosing or prescribing. Please consult your physician before undertaking any form of medical treatment, diet plan or exercise regimen implied in this publication.

## ASK THE DOC!

### MARK FROM GAINESVILLE ASKS:

*“When my physician discusses “margin” when talking about radiation treatment what does he mean?”*



A radiation treatment margin is the area of healthy tissue around the target area that also receives radiation. Your radiation treatment margin may be the tissue around an existing tumor or around the cavity where the tumor was prior to surgical removal. Radiation oncologists are working to find ways to keep radiation treatment margins very small, so that less healthy tissue is affected by radiation. Carefully calculated radiation treatment margins are a critical part of High-Dose Rate (HDR) brachytherapy and Intensity-Modulated Radiation Therapy (IMRT).

Do you have a question for a CCCNF Physician?  
Email us at [kthompson@cccnf.com](mailto:kthompson@cccnf.com)

## GOT FIBER?



Diets high in fiber are proven to lower the risks of cancer, heart disease, diabetes and obesity. Here's how to sneak “good carbs” and extra fiber into your daily diet with a minimum of effort.

- Eat cereal every day for breakfast.
- Eat two apples every day.
- Make a yogurt mix (yogurt with cereal, and strawberries) every Wednesday for breakfast.
- Have an afternoon snack of baby carrots and broccoli florets dipped into low-fat ranch dressing 3 days a week.
- Keep a container of gorp (peanuts, raisins, cereal, and soy nuts) in your car and office for snacking.
- Switch to whole grain crackers.
- Mix your regular cereal with the high-test stuff.
- Add kidney beans or chickpeas (a.k.a. garbanzo beans) to your next salad.
- Make sure that the first ingredient in whole grain products has the word “whole” in it, as in “whole wheat” or “whole grain.”
- Every week, try one “exotic” grain. How about amaranth, bulgur, or wheatberries?