

REX CANCER CENTER CANCER PREVENTION & DETECTION TOOL KIT



chosen for excellence

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REX CANCER CENTER

Rex Cancer Center is pleased to provide you with this "Cancer Prevention and Detection Toolkit". In this toolkit you will find information on cancer risk factors and screening tests along with general wellness tips for healthy living. We believe wellness and preventive healthcare are among the greatest gifts you can give yourself and those you care about – today, tomorrow and for your life!



Rex Cancer Center is certified by the American College of Surgeons as a Comprehensive Community Cancer Center. Patients at Rex receive the same level of care found in many major university medical centers with the added convenience of not having to travel far from home. Patients also have added confidence knowing that Rex is affiliated with the nationally-recognized N.C. Cancer Hospital and the UNC Lineberger Comprehensive Cancer Center in Chapel Hill, N.C.

Community Outreach at Rex Cancer Center

In addition to excellent care, the Rex Cancer Center has a number of cancer outreach programs, sponsored in part by The Rex Healthcare Foundation, which provide you and others in the community with a variety of services and information to help them take better care of themselves and those they love.

Rex Cancer Center outreach services include interactive workshops and presentations that help to educate adults about the early detection of cancer which can be customized to fit the needs of your group or business. Our workshops and lectures are lead by specially-trained health instructors, registered nurses and members of the Save Our Sisters of Rex. Save Our Sisters of Rex is a group of specially-trained lay-health volunteers from the community who have made a commitment to provide the surrounding communities with current breast health information, resources and support.

For more information about Rex Cancer Center outreach services or to schedule your community lecture please call (919) 784-6495 or visit rexhealth.com.

Patient and Family Services at Rex Healthcare

Rex Cancer Center has a long tradition of caring for patients not only through the latest technology and treatments for cancer, but also with compassion and support throughout their care. At Rex, we offer a full range of cancer services in convenient locations near you, and a staff of cancer specialists including doctors, nurses, therapists, registrars, counselors, social workers and educators dedicated to helping patients cope with their diagnosis, treatment and recovery from cancer.

The foundation of the Rex Cancer Center is outstanding radiation oncology and hematology/oncology practices. Rex Cancer Center offers the most up-to-date cancer care, including cutting-edge treatments and clinical trials. In addition to offering a full range of oncology services in diagnosis and treatment of cancer, Rex Cancer Center also provides our patients and their families with programs, patient navigation, nutritional consults, integrative-wellness workshops, support groups, individual and family counseling and valet parking.

The Rex Cancer Resource Center offers a variety of programs, classes and services to help patients and their families cope with diagnosis, treatment and recovery from cancer. The Rex Cancer Resource Center is made possible by a generous grant from The Rex Healthcare Foundation and is located on the main floor (level 2) of the Rex Cancer Center.

**For more information about
Rex Cancer Center physicians
and treatment please call
(919) 784-3105 or visit
rexhealth.com.**

UNDERSTANDING CANCER

What is cancer?

Cancer is the general name for a group of diseases in which cells in part of the body grow out of control and are able to invade and harm other tissues and organs. Cancer cells can spread to other parts of the body through the blood and lymph systems. Untreated cancer can cause serious illness and even death.

Cancer is not just one disease but many diseases. There are more than 100 different types of cancer. Most cancers are named for the organ or type of cell in which they start - for example, cancer that begins in the colon is called colon cancer; cancer that begins in basal cells of the skin is called basal cell carcinoma.

Cancer Types

Cancer types can be grouped into broader categories. The main categories of cancer include:

Carcinoma: cancer that begins in the skin or in tissues that line or cover internal organs.

Sarcoma: cancer that begins in bone, cartilage, fat, muscle, blood vessels, or other connective or supportive tissue.

Leukemia: cancer that starts in blood-forming tissue such as the bone marrow and produces many abnormal blood cells that then enter the blood.

Lymphoma and myeloma: cancers that begin in the cells of the immune system.

Central nervous system cancers: cancers that begin in the tissues of the brain and spinal cord.



How does cancer form?

The body is made up of many types of cells. These cells grow and divide in a controlled way to produce more cells as they are needed to keep the body healthy. When cells become old or damaged, they die and are replaced with new cells.

However, sometimes this orderly process goes wrong. The genetic material (DNA) of a cell can become damaged or changed, producing mutations that affect normal cell growth and division. When this happens, cells do not die when they should and new cells form when the body does not need them. The extra cells may form a mass of tissue called a tumor. Not all tumors are cancerous; tumors can be benign or malignant.

Benign tumors: are not cancerous and they can often be removed and, in most cases, they do not come back. Cells in benign tumors do not spread to other parts of the body.

Malignant tumors: are cancerous. Cells in these tumors can invade nearby tissues and spread to other parts of the body. The spread of cancer from one part of the body to another is called metastasis. Not all cancers form tumors. For example, leukemia is a cancer of the bone marrow and blood and the cells circulate through the body to other areas.

How many people are affected by cancer?

New cases in 2008: 1,437,180 (does not include nonmelanoma skin cancers)

Deaths in 2008: 565,650



TOP 10 SITES OF CANCER

Estimates for the United States

Male

- Prostate (25%)
- Lung & Bronchus (15%)
- Colon & Rectum (10%)
- Urinary Bladder (7%)
- Non-Hodgkin Lymphoma (5%)
- Kidney & Renal Pelvis (4%)
- Oral Cavity & Pharynx (3%)
- Leukemia (3%)
- Pancreatic (3%)



Female

- Breast (26%)
- Lung & Bronchus (14%)
- Colon & Rectum (10%)
- Uterine Corpus (5%)
- Non-Hodgkin Lymphoma (4%)
- Thyroid (4%)
- Melanoma of the Skin (4%)
- Ovary (3%)
- Kidney & Renal (3%)
- Leukemia (3%)

Lung Cancer claims the life of nearly three times as many men and two times as many women each year than any other cancer.

Based on 2008 data - cancer incidence and mortality rates are estimated by the American Cancer Society.

The following pages provide information on cancers that are diagnosed most frequently or that can be prevented or detected early.



BREAST CANCER

What is breast cancer?

Breast cancer forms in breast tissue and can spread by moving through the lymph node system. Most breast cancer forms in the glands that make breast milk (lobules) or the small tubes that carry milk from the lobules to the nipples (ducts).

New diagnosis in 2008: 182,460 (female); 1,990 (male)

Deaths in 2008: 40,480 (female); 450 (male)

What are the risk factors of breast cancer?

Gender: Simply being a woman is the main risk factor for developing breast cancer. Although women have many more breast cells than men, the main reason they develop more breast cancer is because their breast cells are constantly exposed to the growth-promoting effects of the female hormones estrogen and progesterone. Men can develop breast cancer, but this disease is about 100 times more common among women than men.

Age: Risk of developing breast cancer increases as a person gets older.

Family history: Breast cancer risk is higher among women who have a close blood relative that has had the disease. Having a mother, sister, or daughter with breast cancer approximately doubles a woman's risk.

Personal history: A woman with cancer in one breast is three to four times more likely to develop a new cancer in the other breast or in another part of the same breast.



Race and ethnicity: White women are slightly more likely to develop breast cancer than are African-American women; however, African-American women are more likely to die of breast cancer.

Breast Tissue: Women with denser breast tissue have more glandular tissue and less fatty tissue, and have a higher risk of breast cancer. Unfortunately, dense breast tissue can also make it harder for doctors to spot problems on mammograms.

What are the screening tests for Breast Cancer?

Clinical Breast Exam (CBE): A clinical breast examination is a physical examination of the breast done by a health professional.

Breast Self-Exam (BSE): A breast self-examination is done by a woman to feel for any changes in her own breast. If changes are felt, the woman should inform her healthcare provider.

Mammogram: A mammogram is a special x-ray picture of the breast and with modern mammography equipment and techniques, women only receive a minimal amount of radiation during the procedure. With mammograms, cancer can be detected before it can be felt. Two x-rays are taken of each breast during mammography, one from above and one from the side. A specially trained physician called a radiologist reads the mammogram to see if any suspicious areas exist. Routine mammography screening appears to reduce breast cancer mortality by approximately 25 percent.

Magnetic Resonance Imaging (MRI): Breast MRI is a non-invasive procedure that doctors use to determine what the inside of the breast looks like with imaging. Each exam produces hundreds of images of the breast: side-to-side, top-to-bottom, front-to-back, which are then read by a Radiologist. No radioactivity is involved, and the technique is believed to have no health hazards. This is often recommended for women at high risk for developing breast cancer.

When should you be screened for Breast Cancer?

Women should know how their breasts normally feel and report any breast changes promptly to their health care provider. Breast self-exam (BSE) is an option for women starting in their 20s.

Clinical breast exam (CBE) should be part of a periodic health exam, about every 3 years for women in their 20s and 30s and every year for women 40 and over.

Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health.

Women at high risk should get an MRI and a mammogram every year. Women at moderately increased risk should talk with their doctors about the benefits and limitations of adding MRI screening to their yearly mammogram.

Get your digital screening mammogram at Rex Breast Care Center. Call (919) 784-3419 or visit rexhealth.com.

CERVICAL CANCER

What is cervical cancer?

Cervical cancer is a disease in which cancer cells form in the tissues of the cervix. The cervix is the lower and narrow part of the uterus where it joins with the top end of the vagina. Cervical cancer usually develops slowly over time. Before cancer appears in the cervix, the cells of the cervix go through changes, in which cells that are not normal begin to appear in the cervical tissue. Later, cancer cells start to grow and can spread more deeply into the cervix and to surrounding areas.

New diagnosis in 2008: 11,070

Deaths in 2008: 3,870

What are risk factors for cervical cancer?

Gender: Cervical cancer only affects women.

Age: The risk of cervical cancer increases with age.

Human papilloma virus infection: The most important risk factor for cervical cancer is infection by the human papilloma virus (HPV). The viruses are called papilloma viruses because some of them cause a type of growth called a papilloma. Papillomas are not cancers, and are more commonly called warts. HPV is passed from one person to another during skin-to-skin contact. HPV can be spread during sex - including vaginal and anal intercourse, and even during oral sex.

Smoking: Women who smoke are about twice as likely as non-smokers to develop cervical cancer.

Immunosuppression: Human immunodeficiency virus (HIV), the virus that causes AIDS, damages the body's immune system and seems to make women more at risk for HPV infections.

Chlamydia infection: Chlamydia is a relatively common kind of bacteria that can infect the reproductive system. It is spread by sexual contact. Some studies have seen a higher risk of cervical cancer in women whose blood test results show past or current chlamydia infection (compared to women with normal test results).

Diet: Women with diets low in fruits and vegetables may be at increased risk for cervical cancer. Also, overweight women are more likely to develop cervical cancer.

Oral contraceptives (birth control pills): There is evidence that taking oral contraceptives (OCs) for a long time increases the risk of cancer of the cervix. Research suggests that the risk of cervical cancer goes up the longer a woman takes OCs, but the risk goes back down again after the OCs are stopped.

Family history of cervical cancer: Cervical cancer may run in some families. If a woman's mother or sister had cervical cancer, her chances of developing the disease are increased by 2 to 3 times.



What are screening tests for cervical cancer?

Pap Test/Smear: A Pap test is a procedure performed by a physician in which cells are collected from the surface of the cervix and vagina. A piece of cotton, a brush, or a small wooden stick is used to gently scrape cells from the cervix and vagina. The cells are viewed under a microscope to find out if they are abnormal.

HPV DNA Test: If cells from the Pap test are found to be abnormal often an HPV DNA test will be done to find out if the woman has the HPV virus. This test can help in planning further treatment.

When should you be screened for cervical cancer?

- Screening should be done every year with the regular Pap test beginning three years after having vaginal intercourse, but no later than 21 years old.
- Beginning at age 30, women who have had 3 normal Pap test results in a row may get screened every 2 to 3 years.
- Women who have an HIV infection or a weakened immune system due to organ transplant, chemotherapy, or chronic steroid use should continue to be screened annually.
- Women 70 years of age or older who have had 3 or more normal Pap tests in a row and no abnormal Pap test results in the last 10 years may choose to stop having cervical cancer screening.
- Women who have had a total hysterectomy (removal of the uterus and cervix) may also choose to stop having cervical cancer screening, unless the surgery was done as a treatment for cervical cancer or pre-cancer.



COLORECTAL CANCER

What is colorectal cancer?

Colon cancer is a disease in which cancer cells are formed in the colon. The colon is the part of the digestive system where the waste material is stored. Rectal cancer is a disease in which cancer cells form in the rectum. The rectum is the end of the colon adjacent to the anus. Together, they form a long, muscular tube called the large intestine (also known as the large bowel). Tumors of the colon and rectum are growths on the inner wall of the large intestine. Benign (non-cancerous) tumors of the large intestine are called polyps. Benign polyps do not invade nearby tissue or spread to other parts of the body and may be removed. If not removed, polyps may develop into cancer.

New diagnosis in 2008: 108,070 (colon); 40,740 (rectum)

Deaths in 2008: 49,960 (colon and rectum combined)

What are risk factors for colorectal cancer?

Age: While younger adults can develop colon and rectum cancer, the chances of developing colorectal cancer increase markedly after age 50. More than 90 percent of people diagnosed with colorectal cancer are older than 50.

Colorectal polyps or colorectal cancer: Individuals with a history of polyps, are at an increased risk of developing colorectal cancer. This is especially true if the polyps are large or if there are many of them.

Inflammatory bowel disease: Inflammatory bowel disease (IBD), which includes ulcerative colitis and Crohn's disease, is a condition in which the colon is inflamed over a long period of time and may increase the risk of colon cancer. Irritable bowel syndrome (IBS), does not carry an increased risk for colorectal cancer.

Family history: Most colorectal cancers occur in people without a family history of colorectal cancer. Still, up to 20 percent of people who develop colorectal cancer have other family members affected by this disease.



Racial and ethnic background: African Americans have the highest colorectal cancer incidence and mortality rates of all racial groups in the United States. People of Jewish and Eastern European descent (Ashkenazi Jews) have one of the highest colorectal cancer risks of any ethnic group in the world.

What are screening tests for colorectal cancer?

Digital Rectal Exam (DRE): In this exam, a healthcare professional uses a gloved finger to find any growths in the rectum. Because this exam can find less than 10 percent of colorectal cancers, it must be used along with another screening test.

Fecal Occult Blood Test (FOBT): In this test, an individual's stool is checked for blood that cannot be seen. If blood is found, another test is done to look for a polyp, a cancer or another cause of bleeding.

Flexible Sigmoidoscopy: In this test, a thin, flexible tube with a light on the end is put into the rectum. Then a doctor looks at the lower part of the colon. This test can be a bit uncomfortable, but it detects polyps when they are very small.

Double-Contrast Barium Enema: For this test, an individual is given an enema with a liquid that makes the colon show up on an x-ray. A doctor looks at the x-ray to find abnormal spots in the entire colon.

Colonoscopy: Before this test is performed, medicine is given to make the person sleepy. A thin, flexible tube is put into the rectum, and the doctor looks at the whole colon. The tube can also be used to remove polyps and cancers during the exam.

When should you be screened for colorectal cancer?

In general, both men and women at average risk of colorectal cancer should begin screening tests at age 50. But you should talk with your doctor about your own health and your family history so that you can choose the best screening plan for you.



LUNG CANCER

What is lung cancer?

Lung cancer forms in tissues of the lung, usually in the cells lining air passages. The two main types are small cell lung cancer and non-small cell lung cancer. These types are diagnosed based on how the cells look under a microscope.

New diagnosis in 2008: 215,020

Deaths in 2008: 161,840

What are risk factors for lung cancer?

Smoking and secondhand smoke: In the United States, about 90 percent of lung cancer deaths in men and almost 80 percent of lung cancer deaths in women are due to smoking. People who smoke are 10 to 20 times more likely to get lung cancer or die from lung cancer than people who do not smoke.

Gender: Former women smokers are at greater risk for developing lung cancer than former men smokers, though it is not known why.

Carcinogens: Carcinogens are things that may cause cancer. Radon gas, silica, chromium, asbestos and arsenic have been linked to lung cancer diagnoses.

Family history: Risk of lung cancer may be higher if a person's parents, siblings (brother or sister), or children have had lung cancer.

Diet: Eating a lot of fat and cholesterol might increase risk of lung cancer. Drinking a lot of alcohol may raise risk as well; however, diets high in fruits and vegetables likely decrease cancer risk.



What are screening tests for lung cancer?

So far, no lung cancer screening test has been shown to prevent people from dying of this disease. Studies of chest x-rays and sputum cytology have concluded that these tests could not find many lung cancers early enough to improve a person's chance for a cure. For this reason, lung cancer screening has not been recommended for the general public or even for people at increased risk, such as smokers.

What are symptoms of lung cancer?

Talk with your health care professional if you experience any of these symptoms.

- A cough that doesn't go away
- Trouble breathing
- Chest discomfort
- Wheezing
- Streaks of blood coughed up from the lungs
- Hoarseness
- Loss of appetite
- Weight loss for no known reason
- Feeling very tired



PROSTATE CANCER

What is prostate cancer?

Prostate cancer is a disease in which cancerous cells form in the prostate. The prostate is a gland in the male reproductive system found below the bladder and in front of the rectum.

New diagnosis in 2008: 186,320

Deaths in 2008: 28,660

What are risk factors for prostate cancer?

Gender: Prostate cancer only affects men.

Age: Prostate cancer is very rare before the age of 40, but the chance of having prostate cancer rises rapidly after age 50. Almost 2 out of 3 prostate cancers are found in men over the age of 65.

Race/ethnicity: African-American men are at the greatest risk of developing prostate cancer and are more likely to be diagnosed at an advanced stage and are twice as likely to die of prostate cancer as white men.

Nationality: Prostate cancer is most common in North America, Northwestern Europe, Australia, and on Caribbean islands. It is less common in Asia, Africa, Central America, and South America.

Family history: Having a father or brother with prostate cancer more than doubles a man's risk of developing this disease.

Diet: Men who eat a lot of red meat or high-fat dairy products appear to have a slightly higher chance of getting prostate cancer. These men also tend to eat fewer fruits and vegetables.

Exercise: Some studies have found that low levels of physical activity, particularly in older men, may increase the risk of advanced prostate cancer.

Inflammation of the prostate: Some studies have suggested that an inflammation of the prostate gland may be linked to an increased risk of prostate cancer.



What are screening tests for prostate cancer?

DRE: The DRE or digital (finger) rectal examination is a quick exam for checking the health of the prostate. For this test, the doctor inserts a gloved and lubricated finger into the rectum. This allows the doctor to feel the back portion of the prostate for size and any abnormal areas.

PSA test: PSA stands for "prostate-specific antigen." PSA is a substance produced by cells from the prostate gland and released into the blood. The PSA test measures the PSA level in the blood. A small amount of blood is drawn from the arm. The doctor checks the blood to see if the PSA level is normal and will compare it with your last PSA test.

When should you be screened for prostate cancer?

Both the prostate-specific antigen (PSA) blood test and digital rectal examination (DRE) should be offered annually, beginning at age 50, to men who have at least a 10-year life expectancy. Men at high risk should begin testing between ages 40 to 45.

Rex Cancer Center has a Prostate Cancer Center of Excellence. For more cancer information visit rexhealth.com.

What is skin cancer?

Skin cancer is a cancer that forms in tissues of the skin. There are several types of skin cancer. Skin cancer that forms in the skin cells that make the pigment (melanocytes) is called melanoma. Skin cancer that forms in the small, round cells in the base of the outer layer of skin (basal cells) is called basal cell carcinoma. Skin cancer that forms in the flat cells that form the surface of the skin (squamous) is called squamous cell carcinoma. Most skin cancers form in older people on parts of the body exposed to the sun or in people who have weakened immune systems.

New diagnosis in 2008: more than 1,000,000

Deaths in 2008: less than 1,000

What are risk factors for skin cancer?

Many freckles, fair skin, and light eyes:

Melanoma occurs more frequently in people with fair skin that burns or freckles easily. Often, these people also have red or blond hair and blue eyes.

Age: About half of all melanomas occur in people over the age of 50. However, young people (ages 20 to 30) can also be diagnosed with melanoma. In fact, melanoma is one of the most common cancers in people less than 30 years of age.

Geographic location: People who live in areas that get high levels of UV radiation from the sun are more likely to get skin cancer.

Sunburns: If an individual has had one or more severe, blistering sunburns during his or her lifetime, there is an increased risk for melanoma.

UV radiation: Although most skin cancers don't appear until after age 50, the damaging effects of the sun's UV rays begin early in life. Therefore, protection against UV rays should begin during childhood.

Midday sun: The sun's rays are most harmful during the hours of 10 a.m. to 2 p.m. standard time or from 11 a.m. to 3 p.m. daylight savings time. It is especially important to wear protective clothing and sunscreen lotion during these hours.

Family history: Having two or more close relatives with melanoma can increase a person's chances of getting the disease. Also, if an individual has had melanoma in the past, the chances of getting it again increase.

Moles: Abnormal moles are more likely to become cancerous than ordinary moles. The more abnormal moles a person has, the greater his or her chances of getting melanoma. If someone has an unusually high number of moles (more than 50), they are at increased risk of developing melanoma.



What are screening tests for skin cancer?

Skin self-exam: A skin self-exam is done to examine moles, birthmarks and blemishes to observe any change in shape, size, color or texture. A mirror can be used to examine areas that are difficult to see.

Visual evaluation: A regular skin cancer screening is performed by a healthcare professional to visibly examine the skin, including the back and scalp and is generally part of a physical exam.

Biopsy: If an unusual spot is detected from the visual exam, a biopsy can be done. A biopsy is the medical removal of suspicious tissue or cells so they can be examined under a microscope to see if any cells are cancerous.

Warning Signs:

- A pearly or waxy bump on your face, ears or neck
- A flat, flesh-colored or brown scar-like lesion on your chest or back
- A firm, red nodule on your face, lips, ears, neck, hands or arms
- A flat lesion with a scaly, crusted surface on your face, ears, neck, hands or arms
- A large brownish spot with darker speckles located anywhere on your body
- A simple mole located anywhere on your body that changes in color, size or feel or that bleeds
- A small lesion with an irregular border and red, white, blue or blue-black spots on your trunk or limbs
- Shiny, firm, dome-shaped bumps located anywhere on your body
- Dark lesions on your palms, soles, fingertips and toes, or on mucous membranes lining your mouth, nose, vagina and anus

When should you be screened for skin cancer?

If you have any of the risk factors or warning signs listed above talk with your health care professional about ways you can prevent skin cancer and when to be screened.



SCREENING GUIDELINES FOR MEN & WOMEN

AGE

FEMALE

MALE

11 – 26

- Annual exam and health counseling
- HPV vaccine

- Annual exam and health counseling

21-29

- Annual exam and health counseling
- Breast – clinical breast exam every 3 years; inform your doctor if you notice any changes in your breast
- Cervical – Pap test every 1 to 2 years

- Annual exam and health counseling

30 – 39

- Annual exam and health counseling
- Breast – clinical breast exam every 3 years; inform your doctor if you notice any changes in your breast. Baseline mammogram recommended at age 35.
- Cervical – Pap test every 1 to 2 years; after 3 normal Pap test in a row ask your doctor about having a Pap test every 2 to 3 years

- Annual exam and health counseling

40-49

- Annual exam and health counseling
- Breast – mammogram every year; clinical breast exam every year; inform your doctor if you notice any changes in your breast
- Cervical - Pap test every 1 to 2 years; after 3 normal Pap test in a row ask your doctor about having a Pap test every 2 to 3 years

- Annual exam and health counseling
- Prostate - Prostate Specific Antigen (PSA) and a Digital Rectal Exam (DRE) annually beginning at 45 years of age for African-American men and/or a male whose father, brother or son had prostate cancer

50 +

- Annual exam and health counseling
- Breast - mammogram every year; clinical breast exam every year; inform your doctor if you notice any changes in your breast
- Cervical - Pap test every 1 to 2 years; after 3 normal Pap test in a row ask your doctor about having a Pap test every 2 to 3 years
- Colon – Fecal Occult Blood Test (FOBT) annually, colonoscopy every 5 to 10 years

- Annual exam and health counseling
- Prostate – Prostate Specific Antigen (PSA) and a Digital Rectal Exam (DRE) annually
- Colon - Fecal Occult Blood Test (FOBT) annually, colonoscopy every 5 to 10 years

All Ages

- Eat healthy, exercise regularly, manage stress, don't smoke

For assistance finding a physician in your area, please contact Rex HealthNet at (919) 784-4490 or rexhealth.com.

The information found on the following pages provides tools to increase general wellness in your life.



NUTRITION & CANCER

Thirty to forty percent of all cancers are directly linked to diet and exercise; the foods you eat can make a big impact on your long term health. It has been said that disease is not caused by what we eat, but by what we do not eat. In essence, it is not the occasional high fat snack or even frequent fast food dining that causes cancer. It is the fact that we do not eat enough of the beneficial plant foods needed to fight disease and keep our immune systems strong.

- American Institute of Cancer Research

10 SUPER FOODS TO INCLUDE IN YOUR DAY

1 OMEGA-3 RICH FOODS: Dietary omega-3 fatty acids, found in both fish oil and flaxseed, may prohibit the growth of tumors in colorectal, breast and prostate tissues. In addition, most marine-derived omega-3 fatty acids are also packed with protein, B vitamins, and selenium. Serving sizes: 3 ounces of fish, 2 teaspoons of flaxseed and 1 ounce of nuts and/or beans.

wild salmon	tuna	sea bass
oysters	walnuts	soybeans
wheat germ	flaxseed (crushed or pressed)	

2 CRUCIFEROUS VEGETABLES: This family of vegetables contains phytochemicals (chemicals found in plants) which help prevent cancer and boost the immune system and, in addition, are loaded with fiber to aid in cardiovascular health. Serving size: ½ cup.

broccoli	cauliflower	cabbage
brussels sprouts	bok choy	kale

3 BERRIES: Berries are loaded with powerful disease fighting antioxidants, fiber and anti-aging benefits that research has shown may slow the growth of cancer cells or inhibit the formation of tumors in lymph nodes, liver and breast cells, as well as trigger the death of tumors in leukemia and colon cells. Serving size: ½ cup.

purple grapes with skin	strawberries	blueberries
cherries	cranberries	raspberries
grape juice	red wine	

4 YOGURT WITH ACTIVE CULTURES: Make sure your yogurt has active cultures. Yogurt plays a primary role in encouraging the growth of "good" bacteria and limiting the growth of "bad" bacteria, while providing a great source of calcium, protein and B vitamins. This balance can improve the immune system, regulate the digestive system and reduce the amount of acids in human waste, which can decrease the absorption of cholesterol. Serving size: 6-8 ounces.

5 LEGUMES: Beans are a wonderful food! Beans are vitamin rich, low-fat, inexpensive, high fiber and full of protein that may lower cholesterol, stabilize blood sugar, relieve constipation, combat high blood pressure and appear to protect against cancers as well. Serving size: ½ cup cooked.

beans	lentils	peas
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6 CITRUS FRUITS: These fruits contain various phytochemicals (chemicals found in plants) that research suggests may slow down the growth of colon cancer and skin cancer. Citrus fruits also have important antioxidants that protects cells from the damaging effects of free radicals. (Antioxidants are substances that may protect cells from the damage caused by unstable molecules known as free radicals. Free radical damage may lead to cancer. Antioxidants interact with and stabilize free radicals and may prevent some of the damage free radicals otherwise might cause.) Serving size: 1 medium piece.

oranges	lemons	limes
grapefruit	tangerines	

7 RED and PINK FRUIT: Red and pink fruits are loaded with fiber, potassium and antioxidants that are released in cooking and that may protect cells against free radical damage. Serving size: ½ cup cubed.

tomatoes	watermelon	papaya
pink guava	pink grapefruit	

8 TEA: Some teas contain powerful antioxidants, which research shows may lower the risk for numerous cancers including colon and pancreatic. There is also evidence that tea may lower the risk of stroke and heart disease. Green tea actually contains about three times the antioxidants found in black tea. Serving size: 1 cup/8 ounces.

green tea	black tea
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9 DARK GREEN LEAFY and ORANGE VEGETABLES: These foods are rich in antioxidants and fiber and evidence suggests that diets rich in these foods may lower the risk of lung, cervical, breast, colorectal, stomach and esophageal cancers.

Serving size: ½ cup cooked.

spinach	orange peppers	carrots
pumpkin	yams	

10 WHOLE GRAINS: Whole grains, where all three parts of the grain kernel are included, are rich in fiber, vitamins, minerals, and phytochemicals (chemicals found in plants). Evidence suggest that regular consumption of whole grains may lower the risk of cancer and particularly the fiber found in whole grains helps prevent colorectal cancer. Serving size: 1 slice bread, ½ cup cooked grains.

oats	wheat germ
brown rice	barley

To schedule a general nutrition consultation at any Rex Wellness Center, visit rexhealth.com for more information.



EXERCISE & CANCER

Researchers have learned that physical activity can affect the risk of cancer. There is convincing evidence that physical activity may reduce the risk of colon and breast cancers. Despite these health benefits, recent studies have shown that more than 60 percent of Americans do not get enough physical activity.

- National Cancer Institute

10 WAYS TO FIT FITNESS INTO EVERY DAY

1 Put on some comfortable shoes

Feet were made for walking. With comfortable shoes on yours, you will be ready to fit more walking into your life: at least 30 minutes a day, at least 10 minutes at a time

2 Put on a pedometer

These tiny step-counters are rapidly becoming today's most important piece of fitness equipment. While there is no "magic" number of steps, 10,000 per day is a great goal.

3 Put on some music

Hate to exercise? How about dancing? Your favorite tunes – softly on headphones or loudly in the living room – can help you pick up the pace and enjoy moving more.

4 Use your legs - instead of the telephone

Need to talk with a co-worker down the hall or a neighbor across the street? Hang up the phone and take a short walk to have your talk. Remember, every step counts!

5 Use your legs – instead of the elevator

Need to go upstairs or downstairs? Forget the crowded slow elevator! The stairs are an easy (and free) way to build beautiful, strong leg muscles.

6 Use your legs – instead of the car

For short errands, walking can be as fast (or even faster) than driving, waiting and parking. Plan to park in one place and walk to different stores.

7 Fidget more

The experts say that it's true – fidgeting burns calories. Forget about sitting still at your desk – wiggle, squirm, standup, sit down, and move around as much as you can.

8 Lift more

One easy way to pump up arm muscles is to keep a set of weights (5 to 10 pounds) at your desk, near the TV or under the couch. Lift while you talk, watch or read.

9 Stretch more

A few good stretches can help relax your body and your mind. You can stretch while working at a computer, watching TV or even driving a car. Just reach out and stretch.

10 Play more

Bounce a ball, fly a kite, swing on a swing, or chase a child. There is no end to the fun when you play at getting fit. Need some playful ideas? Just ask your favorite kid!

STRESS & CANCER

Stress hormones increase blood pressure, heart rate, and blood sugar levels. Small amounts of stress are believed to be beneficial; however, stress for long periods of time and/or at high level may be harmful. In addition, continued stress can increase the risk of obesity, heart disease, depression, and various other illnesses, while leading to unhealthy behaviors, such as overeating, smoking, or abusing drugs or alcohol, that may affect cancer risk.

- National Cancer Institute

10 DAILY STRESS REDUCERS

- ✓ **Simplify, simplify, simplify...**
- ✓ **Schedule a realistic day.**
Avoid the tendency to schedule back to back appointments; allow time for a breathing spell.
- ✓ **Say "no"!**
Saying "no" to extra projects, social activities, and invitations you do not have the time or energy for takes practice, self-respect and a belief that everyone and everyday needs time to relax and be alone.
- ✓ **Plan ahead.**
Do not let the gas tank get below one-quarter full; keep a well-stocked 'emergency-shelf' of home staples; do not wait until you are down to your last bus token or postage stamp to buy more.
- ✓ **Be prepared to wait.**
A paperback book can make a wait in a post office line almost pleasant.
- ✓ **Do not rely on your memory.**
Write down appointment times, when to pick-up the laundry, when library books are due, etc.
- ✓ **Learn to live one day at a time.**
- ✓ **Every day, do something that you really enjoy!**
- ✓ **Get up fifteen minutes earlier in the morning.**
The inevitable morning mishaps will be less stressful!
- ✓ **Make duplicates of all keys.**
Place a house key in a secret spot in the garden and carry a duplicate car key in your wallet, separate from your key-ring.



Adapted from 52 Proven Stress Reducers.

SMOKING & CANCER

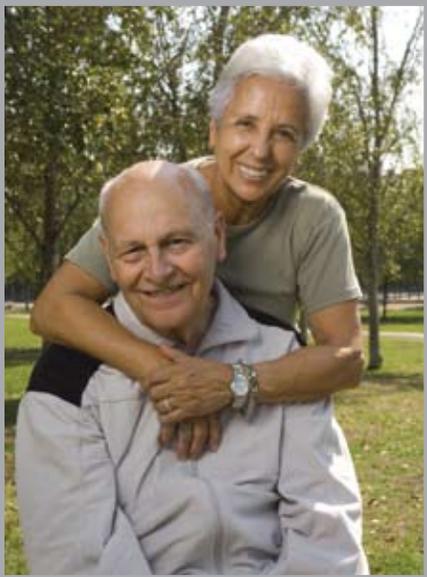
No matter how old you are or how long you have smoked, quitting can help you live longer and be healthier. Never-smokers and ex-smokers enjoy a higher quality of life with fewer illnesses from cold and flu viruses, better self-reported health, and reduced rates of bronchitis and pneumonia.

-American Cancer Society

10 HEALTH REASONS FOR NOT SMOKING

- 1 You are beginning the start of a healthy life.**
- 2 20 minutes after quitting...**
blood pressure and pulse rates drop to normal, and temperature to hands and feet return to normal.
- 3 8 hours after quitting...**
carbon monoxide level in blood drops to normal and oxygen level increases.
- 4 24 hours after quitting...**
the chance of heart attack decreases.
- 5 2 weeks-3 months after quitting...**
circulation improves and lung function increases up to 30 percent.
- 6 1-9 months after quitting...**
coughing, sinus congestion, fatigue and shortness of breath decrease; cilia regain normal function in the lungs, increasing the ability to handle mucus, clean the lungs and reduce infection.
- 7 1 year after quitting...**
The chance of having a heart attack is cut in half.
- 8 5 years after quitting...**
stroke risk is reduced to that of a nonsmoker.
- 9 10 years after quitting...**
lung cancer death rate is about half that of a continuing smoker's. Risk of cancer of the mouth, throat, esophagus, bladder, kidney and pancreas decreases.
- 10 15 years after quitting...**
coronary heart disease risk is that of a nonsmoker.

ADDITIONAL RESOURCES



Rex Cancer Center hopes that the Cancer Prevention & Detection Toolkit is a helpful resource with valuable early detection and cancer prevention information. Assessing your cancer risk, participating in cancer screenings, eating in moderation, regular exercise, reducing stress and not smoking are all recommendations from the leading researchers in the medical field to reduce your risk of cancer.

We encourage you to continue to take steps to improve your health. For more information and resources please visit the websites below:

LOCAL

Rex Cancer Center - rexhealth.com/cancer

Rex Healthcare - rexhealth.com

UNC Health Care - unchealthcare.org



STATE

North Carolina Comprehensive Cancer Program - nccancer.com

NATIONAL

American Cancer Society - cancer.org

Centers for Disease Control and Prevention - cdc.gov

National Cancer Institute - cancer.gov

Smoke Free - smokefree.gov



CONTACTS

Rex Healthcare: (919) 784-3100

Rex Cancer Center, main: (919) 784-3105

Rex Cancer Center, outreach: (919) 784-6495

Rex HealthNet: (919) 784-4490

Rex Breast Care Center (919) 784-6186

Rex Wellness Center (919) 784-1371