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Excellence with Empathy

Yesterday I planned to write a different page, a page about excellence in practicing nuclear medicine technology. That was before I saw her. I was glad to see my friend, as I had not seen her for a few weeks. We exchanged greetings and talked a while. At first I hadn't noticed, then it struck me. Was she wearing a wig? My mind raced as I tried to pretend that I hadn't noticed. I did not want to make her feel any more self-conscious than what she already must have been feeling. My friend confirmed my worst fears. She was wearing a wig and, yes, she was undergoing chemotherapy treatments for breast cancer.

Since then, I've thought a lot about my friend. What could I do to show my support? One thing I decided to do was to write this column.

The Race for the Cure is a fund-raising event for the Susan B. Komen Foundation for breast cancer. Races are held in cities all over the nation on different weekends throughout the year. The Portland Race is held during September each year. Most of the money raised stays in the local community to fund breast health classes and provide mammograms for low-income women. A portion of the money goes to the national organization and helps fund breast cancer research.

The history behind the foundation is an all too familiar story. Susan Koman was a young woman who died of breast cancer. Her sister started the foundation in her honor. The organization continues to grow as new chapters start up every year.

Race day is hard to explain. You just have to be there. My first race was also the first Portland Race, and it was amazing. The first clue that this was something special came when I arrived at the race location. There was no available parking for blocks. Women wearing the race T-shirt filled the sidewalks. And they were converging from every direction, headed for the starting line.

The race began with the world-class runners, followed by the rest of us. I had never seen so many women in one place at one time, all doing the same thing. There were women of every description running or walking. There were women as far as I could see ahead of me. I turned around and saw even more women behind me.

There were poignant sights as some participants walked in memory of loved ones. Two teenage women walked in honor of their mother, carrying her picture on a placard throughout the race. Two other young women pushed their grandmother in her wheelchair for the entire distance.

Survivors of breast cancer wear pink visors for the race. The number of bright visors bobbing up and down attests to the huge numbers of women who have been and will be diagnosed with breast cancer during their lifetimes. Breast cancer is the most common cancer for women in America and is the leading cause of death for women between the ages of 35 and 55.

After the race, all the participants go their separate ways. Yet each year when my friends and I go to brunch, no matter where we go, we always find several tables of women wearing the race T-shirt. We all smile and nod to each other in acknowledgment. This camaraderie among total strangers continues for a few more hours as we fan out within the metropolitan area. Others ask us, what's with the T-shirts?

September 1995 will mark the fourth Portland Race, which has grown every year. If you have the opportunity to participate in your community, I encourage you to do so. It's a good cause and a great way to get a little exercise.

"Technical Aspects of Prone Dependent-Breast Scintimammography" by Linda Diggles, Ismael Mena and Iraj Khalkhali (1) was selected as the Outstanding Paper of 1994 by the associate editors of the *Journal of Nuclear Medicine Technology*. Linda Diggles was presented with the award at the Technologist Section Business Meeting in Minneapolis in June. This paper describes the technical aspects of scintimammography for detecting breast cancer in patients with positive mammography or positive clinical findings. The paper appeared in the September 1994 issue of *JNMT*. I encourage you to read the paper and study the authors' procedure and techniques.

A good way to gain experience is to perform scintimammography on consenting women scheduled for breast biopsy. This allows technologists to develop the procedure locally and increase their skills. Careful patient positioning and optimal image display require experience. This approach also allows physicians to gain experience viewing the images. This group of patients also provides correlation results in a short period of time. Approximately 150,000 new cases of breast cancer are diagnosed each year in the U.S. Five times as many biopsy procedures are performed; four of five lumps are found to be benign. Adequate statistics should not be an issue.

An interesting account of what it's like for a breast cancer patient to have a bone scan can be found in Joyce Slayton Mitchell's book, *Winning the Chemo Battle* (2).

Although we may perform the bone scan procedure several times a day, it is the first one for many of our patients and we must be sensitive to this. In my experience, most breast cancer patients are not worried about the bone scan itself but are worried about the results. These results may change the patient's life and she knows it. This is a very stressful time for our patients. We need to be as supportive as possible.

One book that I have found helpful as a quick reference for technologists is *The American Cancer Society Cancer Book* (3). The text is divided into two parts. Part 1 includes 14 chapters of general information such as cancer statistics, principles of cancer chemotherapy, radiation therapy, genetics and cancer, and other topics that apply generally to all cancers. There are 20 chapters in Part 2 and each discusses a specific cancer or related cancers. Chapter 17 is 44 pages devoted to breast cancer and presents risk factors, breast anatomy, self-examination, mammography, diagnosis of breast cancer including cell types and staging criteria, treatment options, prostheses and reconstruction, social and emotional factors, and additional sources of information. This chapter easily serves as a primer on breast cancer.

In their book, *Cancervive the Challenge of Life After Cancer*, Susan Nessim and Judith Ellis provide insight into the experience of surviving cancer (4). I highly recommend this book to survivors. Health care providers should also read this book to increase their understanding of the issues that survivors encounter.

Excellence requires technical skills such as careful positioning and technique. Excellence also includes the demonstration of empathy toward our patients. Empathy requires that we have an understanding of our patients' feelings and that we perform our technical procedures with sensitivity and compassion.

REFERENCES:

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