

## Nonprofit offers services to help diminish stress of breast cancer



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NATE SMALLWOOD | TRIBUNE-REVIEW

Amanda Agwuocha, 36, of Brighton Heights, poses for a portrait inside of the Allegheny Health Network Health and Wellness Pavilion in Wexford on Jan. 19, 2017.

When Amanda Agwuocha learned she had breast cancer at age 35, her thoughts traced a course any young mother's might.

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At diagnosis, the cancer had spread from her right breast to lymph nodes under her arm and in her chest wall, making it Stage 3 — one stage before the disease becomes metastatic, spreading to distant organs or other body parts.

Dr. Shivani Duggal, a breast oncology surgeon at Allegheny Health Network's Wexford Health + Wellness Pavilion, recommended chemotherapy, surgery and radiation, the standard components of breast cancer treatment.

Agwuocha's age made her a candidate for a program, offered by Pittsburgh-based breast cancer nonprofit Glimmer of Hope, that aims to ease the burden of the disease for young women, Duggal said.

At the "Home for Hope," built about a year ago at the Wexford pavilion, Agwuocha receives free massages, acupuncture and nutrition counseling. The services are meant to ease the stress of breast cancer and the discomforts that come as side effects of treatment, Duggal said.

She said the program helps address what she sees as a growing problem.

"For some reason, I'm seeing a lot of young people with breast cancer. And it is troubling to me," she said.

Diana Napper, who founded Glimmer of Hope in 1994, said she sees more breast cancer in young women now than when she started the nonprofit and wanted to do something specifically to help them.

"The more we got involved with young women, the more we saw a need for an integrative oncology program," Napper said.

The group started offering the stress-relieving services to women of all ages with breast cancer at Magee-Womens Hospital of UPMC about two years ago, Napper said. The Home for Hope in Wexford is focused on women under 40 and offers child care in addition to the other services, she said.

National studies don't show an overall increase in the incidence of breast cancer in women under 40, but there has been a steady uptick in diagnoses of advanced breast cancer in young women, according to a 2013 study published in the Journal of the American Medical Association.

Metastatic breast cancer increased by about 2 percent per year from 1976-2009 among 25- to 39-year-old women, the study found. In 2009, 2.9 women per 100,000 were diagnosed; in 1976, 1.53 women per 100,000 were diagnosed. Breast cancer is the most common malignant tumor in 15- to 39-year-old women in the United States, according to the study.

The U.S. Preventive Services Task Force doesn't recommend women start regular mammograms until age 50 unless they have above-average risk or their doctors recommend it. Because the disease is uncommon, the risks of screening — including the stress of "false positive" test results

and the small risk of harms from testing — outweigh the benefits for young women, according to the task force, an independent federal panel of experts.

When young women find out they have breast cancer, it is because of a lump or another physical sign. At that point, Duggal said, the disease is more advanced than the stages often picked up by mammograms.

Duggal said she doesn't know what is driving the rate of breast cancer in young women she is seeing. She suspects birth control, which is associated with increased breast cancer risk due to its effects on hormones, and other environmental factors play a role.

"The main concern for me is why is this happening and how can we make it stop," she said. "In the meantime, I want to help (young women) in the best way I can."

Agwuocha said she found a lump after noticing that her baby had difficulty nursing on her right breast.

"There were a few warning signs, but I didn't ever think breast cancer," she said. "It does not run in our family, and I tested negative for the genetic gene. It came as a huge surprise."

She got her first free massage before starting chemotherapy. She said it helped.

"The amount of stress and worry and just your world coming down on you during that time is so intense that I really feel like my turning point was that first massage," she said. "Because it brought me to a place where I could stop and refocus, and I relaxed for like that one hour and it really kind of released a lot of that stress that I was under."

She receives regular acupuncture treatments that she says help with the nausea side effect of chemotherapy.

Neither massage nor acupuncture treat cancer, but some studies have shown they can help with side effects.

Studies have shown that massage can reduce stress, anxiety and depression in cancer patients and help with nausea and fatigue. Others have shown that acupuncture can improve immune response, reduce pain in cancer patients, help with fatigue and reduce other negative side effects.

While massages and acupuncture can offer relief, the services often are far from the mind of a young person newly diagnosed with cancer, Duggal said.

"They're not necessary, so people don't go searching for them," she said. "And people feel selfish that they're taking time to do them or using financial resources to do them. This is a way to do it guilt-free, to make it part of their program, part of their care."

Napper said she started the Home for Hope as a pilot program a year ago with 10 women. The organization saw positive results and plans to expand it to another 10 women. In the future, the organization could consider expanding the program to other cancers, she said.

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