

BERRIEN COUNTY CANCER SERVICE NEWSLETTER

www.bccancerservice.org

In honor of the committed service of Olove Colcord, R.N.

THE MISSION OF THE BERRIEN COUNTY CANCER SERVICE:

To provide free skilled home nursing services, equipment, information and supplies at cost for cancer patients and their families in Berrien County.



October 2013

(269) 429-3281

VOLUME XXII

ISSUE X

The **BERRIEN COUNTY CANCER SUPPORT GROUP** is a group for patients, family members and care givers. Come share successes, feelings, fears and practical methods of coping with the physical and emotional aspects of living with the diagnosis of cancer.

October

O hushed October morning mild,
Thy leaves have ripened to the fall:
Tomorrow's wind, if it be wild,
Should waste them all.
The crows above the forest call;
Tomorrow they may form and go.

O hushed October morning mild,
Begin the hours of this day slow.
Make the day seem to us less brief.
Hearts not averse to being beguiled.
Beguile us in the way you know.
Release one leaf at break of day;
At noon release another leaf;
One from our trees, one far away.
Retard the sun with gentle mist;
And chant the land with amethyst.
Slow, slow!

For the grapes' sake, it they were all,
Whose leaves already are burnt with frost,
Whose clustered fruit must else be lost—
For the grapes' sake along the wall.

~Robert Frost~

BCCS BULLETIN BOARD

BCCS OPEN HOUSE

October 24



This year is our 65th year of being the Berrien County Cancer Service! We will be celebrating this mile stone during our Open House on Thursday, **October 24 from 10 a.m. to 6 p.m.** So be sure to **SAVE THE DATE!** We will have a table full of refreshments, so **stop by for lunch or come between 5p – 6p when we will have a pizza party!** Bring the family and enjoy the fun. In the meantime, come see our quilt on display and buy some raffle tickets. **The quilt raffle will be held after the pizza party at 6:00 p.m.**

QUILT RAFFLE TICKETS

Make our **QUILT RAFFLE** a Success! We have lots of raffle tickets that need homes. **The tickets are only \$1 each or 6 for \$5.** You may view the beautiful queen-sized quilt on our website at bccancerservice.org. If you do not have internet access, call our office at 269-429-3281 and we will mail you a picture. **In addition to buying tickets, we are looking for volunteers to sell tickets.** Call or stop by to pick a packet of tickets up and give your friends, family, social club, etc. the opportunity to win a quilt and help someone with cancer. Remember each ticket is a winner by providing in-home nursing support to the cancer patients of Berrien County, however, only 1 ticket wins the quilt! The drawing will be held at our Open House on Thursday, October 24 at 6 pm.

GOLDEN ACORN AWARD GRANTEE



The Berrien County Cancer Service was honored as a **Golden Acorn Award Grantee** on Thursday, September 12. This award honors non-profit organizations that have been funded by the Berrien Community Foundation. There are 4 Golden Acorn Awards granted, each with a different focus area. The focus area that BCCS was granted the award for **“Building a Spirit of Community/Arts & Culture” by In-Home Nursing Services for Cancer Patients.** With Berrien County being a rural community, many patients who are going through cancer treatment benefit from having a nurse come into their homes. We appreciate the Berrien Community Foundation for supporting our mission and for all they do to make our community a better place to live.

NEW WEBSITE!

It is still at the same address but has a whole new look! bccancerservice.org

Our current and past newsletters may be found on our website!

You may also find us on **Facebook** at **Berrien County Cancer Service**

Check out the latest pictures and “Like” us while you are there!

View the Quilt on our website!



Delirium is a confused mental state that causes changes in awareness and behavior.

Delirium is a confused mental state that can occur in patients who have cancer, especially advanced cancer. Patients with delirium have problems with the following:

- Attention
- Thinking
- Awareness
- Behavior
- Emotions
- Judgment
- Memory
- Muscle control
- Sleeping and waking

There are three types of delirium:

- Hypoactive: The patient is not active and seems sleepy, tired, or depressed.
- Hyperactive: The patient is restless or agitated.
- Mixed: The patient changes back and forth between being hypoactive and hyperactive.

Delirium may come and go during the day.

The symptoms of delirium usually occur suddenly. They often occur within hours or days and may come and go. Delirium is often temporary and can be treated. However, in the last 24 to 48 hours of life, delirium may be permanent because of problems like organ failure. Most advanced cancer patients have delirium that occurs in the last hours to days before death.

Delirium may be caused by cancer, cancer treatment, or other medical conditions.

There is often more than one cause of delirium in a cancer patient, especially when the cancer is advanced and the patient has many medical conditions. Causes of delirium include the following:

- Organ failure, such as liver or kidney failure.
- Electrolyte imbalances: Electrolytes are important minerals (including salt, potassium, calcium, and phosphorous) in blood and body fluids. These electrolytes are needed to keep the heart, kidneys, nerves, and muscles working the way they should.
- Infections.
- Paraneoplastic syndromes: Symptoms that occur when cancer-fighting antibodies or white blood cells attack normal cells in the nervous system by mistake.

- Side effects of medicines and treatments: Patients with cancer may take medicines with side effects that include delirium and confusion. The effects usually go away after the medicine is stopped.
- Withdrawal from medicines that depress (slow down) the central nervous system (brain and spinal cord).

It is important to know the risk factors for delirium.

Patients with cancer are likely to have more than one risk factor for delirium. Identifying risk factors early may help prevent delirium or decrease the time it takes to treat it. Risk factors include the following:

- Serious illness.
- Having more than one disease.
- Older age.
- Dementia.
- Low level of albumin (protein) in the blood, which is often caused by liver problems.
- Infection.
- High level of nitrogen waste products in the blood, which is often caused by kidney problems.
- Taking medicines that affect the mind or behavior.
- Taking high doses of pain medicines, such as opioids.

The risk increases when the patient has more than one risk factor. Older patients with advanced cancer who are hospitalized often have more than one risk factor for delirium.

Delirium causes changes in the patient that can upset the family and caregivers.

Delirium may be dangerous to the patient if his or her judgment is affected. Delirium can cause the patient to behave in unusual ways. Even a quiet or calm patient can have a sudden change in mood or become agitated and need more care.

Delirium can be upsetting to the family and caregivers. When the patient becomes agitated, family members often think the patient is in pain, but this may not be the case. Learning about differences between the symptoms of delirium and pain may help the family and caregivers understand how much pain medicine is needed. Health care providers can help the family and caregivers learn about these differences.

Delirium may affect physical health and communication.

Patients with delirium are:

- More likely to fall.
- Sometimes unable to control bladder and/or bowels.
- More likely to become dehydrated (drink too little water to stay healthy).

They often need a longer hospital stay than patients without delirium.

The confused mental state of these patients may make them:

- Unable to talk with family members and caregivers about their needs and feelings.
- Unable to make decisions about care.

This makes it harder for health care providers to assess the patient's symptoms. The family may need to make decisions for the patient.

Possible signs of delirium include sudden personality changes, problems thinking, and unusual anxiety or depression.

When the following symptoms occur suddenly, they may be signs of delirium:

- Agitation.
- Not cooperating.
- Changes in personality or behavior.
- Problems thinking.
- Problems paying attention.
- Unusual anxiety or depression.

The symptoms of delirium are a lot like symptoms of depression and dementia.

Early symptoms of delirium are like symptoms of depression and dementia. Delirium that causes the patient to be inactive may appear to be depression. Delirium and dementia both cause problems with memory, thinking, and judgment. Dementia may be caused by a number of medical conditions, including Alzheimer disease. Differences in the symptoms of delirium and dementia include the following:

- Patients with delirium often show changes in how alert or aware they are. Patients who have dementia usually stay alert and aware until the dementia becomes very advanced.

- Delirium occurs suddenly (within hours or days). Dementia appears gradually (over months to years) and gets worse over time.

Older patients with cancer may have both dementia and delirium. This can make it hard for the doctor to diagnose the problem. If treatment for delirium is given and the symptoms continue, then the diagnosis is more likely dementia. Checking the patient's health and symptoms over time can help diagnose delirium and dementia.

Physical exams and other laboratory tests are used to diagnose the causes of delirium.

Doctors will try to find the causes of delirium.

- **Physical exam and history** : An exam of the body to check general signs of health, including checking for signs of disease, such as lumps or anything else that seems unusual. A history of the patient's health habits, past illnesses including depression, and treatments will also be taken. A physical exam can help rule out a physical condition that may be causing symptoms.
- **Laboratory tests** : Medical procedures that test samples of tissue, blood, urine, or other substances in the body. These tests help to diagnose disease, plan and check treatment, or monitor the disease over time.

Treatment includes looking at the causes and symptoms of delirium.

Both the causes and the symptoms of delirium may be treated. Treatment depends on the following:

- Where the patient is living, such as home, hospital, or nursing home.
- How advanced the cancer is.
- How the delirium symptoms are affecting the patient.
- The wishes of the patient and family.
-

Treating the causes of delirium usually includes the following:

- Stopping or lowering the dose of medicines that cause delirium.
- Giving fluids to treat dehydration.
- Giving drugs to treat hypercalcemia (too much calcium in the blood).
- Giving antibiotics for infections.

In a terminally ill patient with delirium, the doctor may treat just the symptoms. The doctor will continue to watch the patient closely during treatment.

Treatment without medicines can also help relieve symptoms.

Controlling the patient's surroundings may help with mild symptoms of delirium. The following may help:

- Keep the patient's room quiet and well-lit, and put familiar objects in it.
- Put a clock or calendar where the patient can see it.
- Have family members around.
- Keep the same caregivers as much as possible.

Patients who may hurt themselves or others may need to have physical restraints.

Treatment may include medicines.

Medicines may be used to treat the symptoms of delirium depending on the patient's condition and heart health. These medicines have serious side effects and the patient will be watched closely by a doctor. These medicines include the following:

- Haloperidol
- Olanzapine
- Risperidone
- Lorazepam
- Midazolam

Thought For The Day

A look may be forgotten,
A word misunderstood,
But the touch of the human hand
Is the pledge of brotherhood

.....

Recipes

Recently we came across some recipes from our founding director, **Olove Colcord** and thought you might enjoy them.

LACY ROLL COOKIES

2 cups brown sugar
2 sticks margarine or butter
½ cup corn syrup (dark or light)
2 cups flour
1 cup chopped nuts
½ teaspoon vanilla

Preheat oven to 325° and grease cookie sheets.

Put sugar, butter, and syrup in top of double boiler – stir until butter is melted, add flour and nuts. Stir until thoroughly mixed. Keep in top of double boiler. Drop by teaspoons onto cookie sheet, leaving 2” between cookies. Don’t use more than 1 teaspoonful per cookie as they spread.

Bake for 9 minutes or until light brown. Remove from oven and let stand for 3 seconds only. Take one at a time off cookie sheet. Roll around handle or wooden spoon. You have to work fast, only do one cookie sheet at a time. Cool on rack and store in airtight container. Makes 5 dozen.

PASTA SALAD

1 lb. pasta (fuschilli or spirals)
15 oz. can tomato sauce
8 oz. bottle Italian salad dressing
1 small red onion, cut in thin slices
1 4 oz. can mushrooms, drained
1 4 oz. can sliced ripe olives, drained
¼ cup chopped fresh parsley

Cook pasta according to directions on package. Drain then rinse in cold water and drain well. Mix remaining ingredients together. Add pasta, toss and chill for several hours. If you are watching cholesterol use water chestnuts instead of ripe olives.

In Loving Memory

During August 2013
Memorial Donations were generously made
by and for the following people

In Memory of Anna Bilton

Mr. & Mrs. Ron Hamilton, St Joseph
Sharon Alexander & Family, Scranton PA
Edward Rogers, Scranton, PA

In Memory of Lillian Blue

Carolyn Norton, Coloma

In Memory of Wyndol & Chad Butler

Lue Butler, Sawyer

In Memory of Gerald Conrad

Glenn & Dorothy Conrad, St. Joseph

In Memory of Marilyn R. Conrad

Glen & Dorothy Conrad, St. Joseph

In Memory of Virginia Hetfield

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Theresa M Gnutek-Hetfield, Elgin IL
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In Memory of Eldonna Koebel

Elna Bevins, Bangor

In Memory of Alex Porzse

Georgia A. Sikich, Benton Harbor

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Kimberley & Donald Karnes, St. Joseph
Debra J. Beebe, Watervliet
Sue Griffith, Benton Harbor
Byron L. Wilson, Harbert
Phyllis Johnson, Stevensville

Berrien County Cancer Service
sends our sincere sympathy to
all those who have recently lost loved ones.
We thank all of our generous donors.
Your donations are very much appreciated and
will help cancer patients in Berrien County.
Thank you.

Looking Ahead

BCCS SUPPORT GROUP – Stevensville

October 1 & 15 – 1:30 p.m.
November 5 & 19 – 1:30 p.m.

BCCS SUPPORT GROUP – Niles

October 8 & 22 – 1:30 p.m.
November 12 & 26 1:30 p.m.

OSTOMY SUPPORT GROUP – Stevensville

October 15 – 1:30 p.m.
November 19 – 1:30 p.m.

RAINBOWS OF HOPE– St. Joseph

Marie Yeager Cancer Center
October 10 – 5:30 p.m.
November 14 – 5:30 p.m.

Ostomy Support Group

Lakeland Regional Medical Center
October 10 – 6:00 p.m.
November 14 – 6:00 p.m.

DATES TO REMEMBER IN OCTOBER

October 1 – International Day of Older People
October 4 – Improve Your Office Day
October 5 – World Teachers Day
October 7 – World Habitat Day
October 9 – Emergency Nurses Day
October 12 – Columbus Day
October 15 – National Grouch Day
October 16 – Boss’s Day
October 18 – Mammography Day
October 23 – Medical Assistants Recognition Day
October 24 – United Nation’s Day
October 26 – National Forgiveness Day
October 28 – National Chocolates Day
October 30 – National Candy Corn Day
October 31 - HALLOWEEN

Newsletters available online

Our newsletters are available on our website:
www.bccancerservice.org. If you would like to be removed from this mailing list, please call our office at 269-429-3281 or send us an e-mail: staff@bccancerservice.org.

Please Consider...

Berrien County Cancer Service, Inc., is a non-profit organization funded primarily by the United Way, private donations and fund-raisers. We receive no Medicare, Medicaid or other insurance payments. To continue our free services to Berrien County cancer patients, we need your help. Any donation is greatly appreciated.

Donations to our General Fund will help balance our current budget. Donations to our Endowment Fund will help guarantee that the Cancer Service will be available for as long as needed. Your contribution to our non-profit 501(c)(3) corporation is tax deductible – an acknowledgment and receipt for tax purposes will be sent.

Donations can be made in honor of someone or in memory of a loved one. In these instances, we would also like to send acknowledgment to the honoree or next-of-kin so please provide that information when making your donation.

_____ General Fund _____ Endowment Fund

Your Name _____

Your Address _____

City/State/Zip _____

Donation Amount \$ _____

OR

In Memory of _____

Please send notification of my gift to:

Name _____

Address _____

City/State/Zip _____

Thank you for your generosity!

Berrien County Cancer Service, Inc.
7301 Red Arrow Highway
Stevensville, MI 49127

RETURN SERVICE REQUESTED

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to be removed from our mailing list. We
value our readers & hope you enjoy it.

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Julie Koch (Accounting Manager)
Henrietta Hein (Newsletter)

CANCER SUPPORT GROUP – Stevensville Office
1st and 3rd Tuesday of each month - 1:30 p.m.
Berrien County Cancer Service, Inc.
7301 Red Arrow Highway
Stevensville, MI 49127
Phone: (269) 429-3281 or (269) 465-5257

RAINBOWS OF HOPE GROUP- St. Joseph
2nd Thursday of each month – 5:30 p.m.
Marie Yeager Cancer Center
Ward and Kinney Room
3900 Hollywood Road
St. Joseph, MI 49085
Phone: (269) 556-7114

CANCER SUPPORT GROUP – Niles
2nd and 4th Tuesday of each month – 1:30 p.m.
Niles Senior Center
1109 Bell Road
Niles, MI 49120
Phone: (269) 429-3281

OSTOMY SUPPORT GROUP
2nd Thursday of each month – 6:00 p.m.
Lakeland Regional Medical Center
Community Room
1234 Napier Ave.
St. Joseph, MI 49085
Phone: (269) 983-8804

