‘Organic’ May Not Mean Healthier

Over the past few decades there has been a commonly held perception that organic foods are healthier for you than conventional foods, but there remains little data to support or disprove this view. In order for a product to be certified organic it must be grown without using any synthetic pesticides or fertilizers. Organic farmers raise livestock free of growth hormones and in more natural environments which contrasts from conventional farming, where practices include use of chemical fertilizers, pesticides, herbicides, antibiotics, and growth hormones. Differences in farming practices are clearly reflected in the price consumers pay at the supermarket, with organic foods often costing twice as much as conventional foods.

Researchers at Stanford University recently examined the available studies to determine the health effects of organic compared with conventional diets. After reviewing 223 studies of nutrient and contamination levels in foods, they concluded that organic products are not necessarily better for you than foods grown using conventional methods. The researchers found no consistent differences in nutrient content, with the exception of high amounts of phosphorus in organic produce. Phosphorus is an essential element for normal function, found in every cell in the body. This finding is not believed to be clinically significant, however, because it is rare for a person to be phosphorus deficient. The analysis also found no difference between the protein and fat content of organic and conventional dairy products; though two previous studies suggested that organic milk may contain more omega-3.

There was also evidence that organic produce had a 30 percent lower risk of pesticide contamination compared to conventional produce.

Researchers analyzed two particular studies that compared children who consumed organic and conventional diets and they found that the urine of children on organic diets had lower levels of pesticide residues. Still, the research suggests that the levels of pesticides found in those who consumed a conventional diet were not high enough to be harmful.

The Stanford study offers no definitive answer as to whether or not an organic diet is safer or healthier than conventional alternatives. Further research on the longitudinal effects of diet needs to be conducted.

Purchasing and consuming organic foods is a personal choice, but what is important for all to remember is that there is strong evidence that a diet rich in fruits and vegetables, whether conventional or organic, is associated with improved health outcomes. Additionally, there are many environmental reasons to consider supporting organic farming.

We would like to introduce Julie Lonardo as the new coordinator for the Program for Young Women with Breast Cancer. She joins us from Boston Children’s Hospital, where she worked in the Division of Hematology/Oncology. Julie has always been an avid volunteer and has a strong interest in philanthropic work. She is excited to be a part of the Program.

Established in 2005, the Program for Young Women with Breast Cancer at Dana-Farber Cancer Institute provides comprehensive care and support to young women confronting the challenges of living with and beyond breast cancer. Our mission is to enhance care and education for patients and their families, as well as to advance understanding of the biology of breast cancer and the experience of the disease for younger women through ongoing research focused on young women. Over 1700 young women have been enrolled to date.

For further information about the Program, please contact Julie at: 617-632-3916 or visit our website at: http://www.dana-farber.org/pat/adult/breast-cancer/program-for-young-women-with-breast-cancer/.

Meet Julie, Program Coordinator

Looking for a way to give back to the Program for Young Women with Breast Cancer and other young women?

VOLUNTEER!

The One-to-One support network needs your help to be successful! If you are interested in learning more about becoming a One-to-One volunteer, please call 617-632-4020.

Helping Kids Cope with Your Diagnosis and Treatment

Young children
If you are trying to decide when to talk to your child about your diagnosis, trust your instincts. Some parents know that they will tell their kids right away while some wait until they have more information. Still others prefer to wait until their children are a bit older to have this talk.

Decide what your child needs
When talking with your child, figure out ahead of time how much you want to share. You don’t need to tell kids everything, but what you do say must be the truth. Assure your child that you will answer questions as honestly as you can. If you don’t have the answer to a question, say so, but also say that you’ll share the answer as soon as you get one. Keep your child informed along the way, and be ready to repeat important information as often as needed.

Give it time
Your child may not be able to absorb the news of your cancer right away, but it will sink in over time. Be patient and accept his or her reactions. Families often find it helpful to keep things as “normal” as possible. Sticking to your family’s regular daily schedule can give your child a sense of stability. Another way to help your child cope with your diagnosis is to include him or her in the process, especially if your son or daughter is older. You might have a child come with you to a medical visit or help you pick out a hat if you are going to lose your hair. For younger children, find activities you can do together, like making cards, drawing pictures, or cooking a favorite food.

As you undergo treatment, you may feel guilty or sad that you can’t do all the things you normally do with your child. This is absolutely normal but not always easy to handle. It’s a perfect thing to discuss with a social worker or counselor.

For more ideas about helping your children cope, please visit The Blum Patient and Family Resource Center located on the first floor of the Yawkey Center for Cancer Care or visit http://www.dana-farber.org/Adult-Care/Treatment-and-Support/Patient-and-Family-Support/Family-Connections.aspx.
Thanks to more than 850 of you to date, the Young Women’s Breast Cancer Study continues to be a fabulous success! By answering surveys, giving blood samples, and allowing us to access your medical records and study previously removed tumor specimens, you are providing a wealth of important data regarding breast cancer in young women which we hope will help many women in the future.

We are currently conducting analyses on tumor and blood specimens to better understand the biology and genetics of breast cancer in young women. We are also evaluating survey and medical record data to explore the unique physical and emotional experiences that young women face after a diagnosis of breast cancer. Some of our results to date are summarized below, but please note that these findings are preliminary and should not be used to make decisions about your health or disease management.

**Biology of Breast Cancer**
- The types of breast cancer that develop in women who have never been pregnant were different from those in women with prior pregnancies: Women who have never been pregnant before they were diagnosed are more likely than others to have a highly hormonally sensitive and less biologically aggressive form of breast cancer called “Luminal A.” Among women who had been pregnant previously, the time since the pregnancy does not seem to affect the type of breast cancer that developed.
- Pathologic features that are known to be associated with more aggressive tumor behavior are more common in young women than in older patient populations. For example, in the first group of tumors analyzed, 60% of the tumors are high grade and 23% are triple-negative. Interestingly, only 12% are Her2-positive. One particular pathologic characteristic called tumor necrosis (cell death) is most frequently found in women diagnosed at or under age 30.

**Presentation of Breast Cancer**
- We found that 81% of young women found their own breast cancers, 12% had their cancers first detected by imaging, 5% had their cancers first detected by a doctor’s breast exam, and 1% had cancers that were diagnosed due to other bodily symptoms. Most women sought medical attention immediately. However, 15% waited at least 90 days before seeking medical attention, and 11% experienced a delay of at least 90 days between seeking medical attention and receiving a diagnosis of breast cancer.

**Body Image & Sexual Functioning**
- Women who had a mastectomy experience more body image problems than those who had a lumpectomy, particularly if they did not undergo immediate reconstruction. Also, treatment with chemotherapy and/or hormonal therapy seems to have less of an effect on body image early after diagnosis.
- Young women who receive chemotherapy are at risk for problems related to sexual functioning early in the survivorship period. This effect appears to be related to several physiologic and psychological mechanisms, underscoring the need for interventions that target both.

**Coping/Distress:**
- Distress is common among young women with breast cancer. Poorer financial status is consistently associated with higher levels of anxiety, depression, and overall distress in this group.
- Young women who rely heavily on support from their friends, family, and other relationships are more likely to experience a reduction in distress during the year after a breast cancer diagnosis than those who cope primarily by staying active.
- Women who rely very heavily on support from family members other than their significant others or parents experienced particularly significant reductions in distress over time.
Additional Resources and Information

Susan G. Komen for the Cure

Susan G. Komen for the Cure is the world’s largest grassroots network of breast cancer survivors and activists, working together to save lives, empower people, ensure quality care for all, and energize science to find cures.

www.komen.org

Young Survival Coalition

The Young Survival Coalition (YSC) is an international, nonprofit network of breast cancer survivors and supporters dedicated to the concerns and issues that are unique to young women with breast cancer.

www.youngsurvival.org

Living Beyond Breast Cancer

Living Beyond Breast Cancer (LBBC) is a national education and support organization whose goal is to improve quality of life and help women take an active role in their ongoing recovery or management of the disease.

www.lbcc.org

FORCE

Facing Our Risk of Cancer Empowered (FORCE) is the only national nonprofit organization devoted to hereditary breast and ovarian cancer. Their mission includes support, education, advocacy, awareness, and research specific to hereditary breast and ovarian cancer. Programs serve anyone with a BRCA mutation or a family history of cancer.

www.facingourrisk.org

Fertile Hope

Fertile Hope is a national initiative dedicated to providing reproductive information, support and hope to cancer patients and survivors whose medical treatments present the risk of infertility.

www.fertilehope.org

Save the Date

Young Women’s Telephone Support Group

Liz Farrell, LICSW
For young women looking to connect with others who understand the impact of living with breast cancer. For more information please contact Julie Lonardo at 617-632-3916 or JLonardo@partners.org.

Facing Forward

Annette Quinn, LICSW
For patients that will complete treatment for breast cancer in 4-6 weeks or those that have completed treatment within the last 3-4 months. Sessions offered year-round. For more information, call Annette Quinn at 617-632-3304.

Metastatic Breast Cancer Support Group

Pat Kartiganer, LICSW
Coping with prognosis, living with uncertainty, and interacting with loved ones. If interested, please contact Pat Kartiganer at 617-632-5605.

Young Women’s Spring Survivor Evening

Date/time: TBD

Take a fitness class or get a no-cost consult with a Dana-Farber exercise physiologist who helps patients and survivors start or improve a fitness program. For more information call 617-632-4523 or visit www.dana-farber.org/exercise.

E-QUEST STUDY SEEKING YOUNG SURVIVORS

Researchers at the Dana-Farber Cancer Institute are conducting a study to understand the best ways to ask questions about cancer survivors’ emotional health. Participants will be asked to complete questionnaires about their emotional health on paper, by computer-administered telephone interview, and an in-person interview in order to study which methods are most effective. Participation involves a single one-hour study visit, and $50 compensation will be provided as a way to thank you for your time and participation in this study.

If you are a cancer survivor between the ages of 18-40 who completed cancer treatment at least two years ago and are interested in participating, contact Equest@dfci.harvard.edu or call a study coordinator at 617-582-8260.