A rchaeologist Richard Freund, PhD, knows what it’s like to make an unexpected discovery. In his more than three decades of work, he’s helped excavate a number of remains, including religious sites and what many believe may be the ruins of Atlantis. Freund’s biggest surprise, however, was not buried in a dig site – it was his cancer diagnosis.

In 2004, Freund, then 49, was part of an archaeological dig in Israel when something didn’t feel right. As a precaution, Freund left the site early and returned home. After meeting with his hematologist, he was sent to Dana-Farber, where he was diagnosed with erythroleukemia – a subtype of acute myeloid leukemia. Freund was in need of a stem cell transplant, and doctors feared that he’d only have months to live without one.

Under the care of Robert Soiffer, MD, chief, Hematologic Malignancies and co-chief, stem cell transplantation and cellular therapies at Dana-Farber/Brigham and Women’s Cancer Center, Freund underwent chemotherapy. He needed to be in remission before he could be matched with a donor. The treatment was successful, and in July of the same year Freund underwent a stem cell transplant thanks to a donor identified through an international bone marrow and blood stem cell registry.

“The tunnel, which prisoners dug using only their hands and spoons, stretched more than 100 feet and served as a route for 80 Jewish prisoners to attempt an escape. Unfortunately, their noise alerted the guards, who pursued them – only 12 managed to escape; 11 of them survived the war.

The discovery, documented by the television science series NOVA, made international headlines, and inspired an off-Broadway play opening in March 2019. “VILNA” chronicles the lives of people and the events that took place in Vilna during World War II. The production’s protagonist, Motke Zeidel, is a survivor of the Ponar tunnel escape.

“These people were up against – and overcame – all odds,” Freund explains. “I’ve thought about them a lot, and if they could make it out of their dire circumstance, I know I can get through whatever cancer throws at me.”

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“Not a day goes by where I don’t think about how lucky I was,” says Freund. “Everything fell into place, and now I’m always looking for ways to pay it forward.”

In January 2005, Freund returned to teaching at the University of Hartford and was excavating later that year. During his career, he has worked on 45 different sites – most of which came after his transplant.

In 2016, he was part of a team that uncovered a Holocaust escape tunnel in Lithuania’s Ponar forest, now known as Paneriai. From 1941-44, the Nazis used the area for mass executions, and then later as a burning site for bodies in an attempt to cover their crimes near the end of the war.

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Breast Cancer Patient Walks Confidently Down the Aisle

A ug. 25, 2018, is a day Kasha Wasylak will never forget; it was the day the 26-year-old bride happily said, “I do,” to her now-husband, Patrick. Standing confidently in front of her loved ones, the ceremony not only solidified a lifetime commitment, but it also brought closure to a turbulent and uncertain year.

The young mother and soon-to-be bride was diagnosed with HER2-positive breast cancer after discovering a lump. “I was devastated,” recalls Wasylak. “I just finished taking my engagement photos. It felt like my whole world was coming apart.”

Wasylak began treatment at the Susan F. Smith Center for Women’s Cancers at Dana-Farber under the care of Ann Partridge, MD, MPH, founder and director of the Young and Strong Program for Young Women with Breast Cancer.

In between her treatment plan, which included both chemotherapy and a bilateral mastectomy, Wasylak was also planning her wedding. Knowing she would likely lose her hair to chemotherapy, she was wary of walking down the aisle with everyone’s eyes on her. In fact, the only thing that prevented her from postponing it was a conversation with Nurse Practitioner Lauren Czapla.

Czapla introduced Wasylak to Dana-Farber’s scalp cooling system. This treatment lowers the temperature of the scalp immediately before, during, and after chemotherapy by pushing liquid coolant through a fitted cap with a neoprene cover – trapping the cold air inside. This reduces blood flow to cells that produce hair, which can help prevent hair loss caused by some chemotherapy drugs.

“This can be a great tool because it allows patients to maintain privacy, and it helps with self-esteem and body image,” Czapla says. “But it’s important to give patients realistic expectations because it doesn’t always work well, and it isn’t compatible with all chemotherapy.”

Wasylak was willing to give it a shot. She wore her cold cap for 30 minutes before each chemotherapy session, and then for another hour following. While the solution wasn’t perfect, she was still able to keep roughly 60 percent of her hair. And it helped her feel confident enough to keep the wedding on its originally scheduled date.

“My cancer diagnosis didn’t take away from the wedding I pictured,” says Wasylak.

“I’m glad this option was available to her because I know how concerned she was leading up to our wedding,” adds Patrick. “I didn’t even notice the hair loss, she looked like a queen.”

Now in remission, Wasylak allocates her time between work and chasing around her two-year-old daughter, Alexa. When she has time, Wasylak says she’ll steal away to ski her favorite mountain in Vermont.

New Law Allows Patients to Defer Student Loans

A new law lets federal student loan borrowers with a cancer diagnosis defer their payments interest-free during treatment – and up to six months beyond. Passage of the law was aided by several groups within Dana-Farber, including Dana-Farber’s Legislative Action Network (LAN), the Young Adult Program (YAP), and a contingent of nurses.

In late 2017, Kerry Scholl Beliveau, RN, BSN, a program nurse in Sarcoma and Bone Oncology, created an email campaign outlining the content and intent of the bill, signed into law in September 2018 as the Deferment for Active Cancer Treatment. She also included a link directing recipients to a simple way to contact their congressperson and express their support.

Until now, individuals could defer student loan payments for a number of qualifying reasons, but a cancer diagnosis had not been considered one. Staff credit the work of Critical Mass: The Young Adult Cancer Alliance, as crucial to educating others about the issue and garnering backing for the bill.

“No it’s important to make sure that patients know this is available to them,” says Beliveau.

The Department of Education has contracts with many loan servicers. Individuals can confirm who their servicer is by calling the National Student Loan Data System at 800-FED-AID or by visiting the deferment and forbearance section of the Federal Student Aid’s website.
Kareem Johnson is not physically located in the Center for Hematologic Oncology, but for the patient calling, he serves as an extension of it.

To improve efficiency and satisfaction on both ends of the line, Dana-Farber has restructured how incoming phone calls from patients and family members are managed. Calls from new patients during business hours are now routed through Dana-Farber’s Welcome Center in the Brookline Village campus, while calls from established patients are connected to one of Dana-Farber’s 19 treatment centers first.

Johnson and 23 other patient representatives at the center are ready to answer questions ranging from “Did my doctor send my biopsy results?” to “Where should I park?”

Previously, calls like these were answered by new patient coordinators and clinical administrative support specialists located within treatment centers. As the patient population increased, however, the overflow of calls were rerouted to an off-site answering service, which only took a message.

Now, the Welcome Center keeps many more calls in-house. “We have two groups of representatives answering calls: one for new patients and one for established patients, because the needs are often different,” says Katie Keavany, vice president of Ambulatory Clinical Operations. “When we can’t answer a question or concern, we connect the caller through a warm introduction to the appropriate person. People appreciate this personal touch.”

The Welcome Center is part of a larger Patient Contact Experience Project led by Keavany. Working with the Adult Patient and Family Advisory Council, clinical leaders, and nursing and disease center staff, the project’s team reevaluated the duties of front-line employees taking patient calls. They found that many other on-site duties prevented these employees from answering calls as quickly or as often as they wanted.

“The Welcome Center helps treatment center-based staff focus on facilitating appointments while also reducing the number of calls sent to the off-site answering service. This creates a better experience for our patients,” explains Ashley Malins, director of new patient and contact operations. “We also established supervisor roles to provide support for front-line staff. This created new entry-level jobs and opportunities for advancement.”

Ashley Robinson and Emily Trainor, who began with front-line roles in treatment centers, for example, were promoted to supervisory roles within the Welcome Center. Previously a new patient coordinator, Robinson ensures that patient representatives like Johnson meet with treatment center employees to gain a better understanding of what they do. Robinson and Trainor also collaborate with the treatment center teams and other Dana-Farber groups to develop resources for patient representatives.

“Patients are grateful and feel comfortable knowing the people who answer their calls are familiar with their doctors and clinical team,” says Robinson. “Doctors and nurses appreciate the clear, detailed, messages they receive from the Welcome Center, and that patients are getting information earlier. And the front-line staff are glad to have more time for their most urgent patient calls and needs.”
Using Music to Cope with Cancer

There is evidence that music can be a powerful therapeutic tool. It has been shown to bring positive changes in mood and reduce anxiety, among other benefits. For cancer patients, music and music therapy – the clinical use of music as a tool to help achieve treatment goals – can also be used to develop positive coping skills.

How we process music is what creates its therapeutic power. Unlike many things, music is not processed in one specific lobe of the brain. Rather, the entire brain processes music when it plays – influencing many aspects of our life, from mood to memory.

Michael Melia, a patient at Dana-Farber, and an advocate for using music as a therapeutic tool explains why and how it has helped him.

In 2015, 30-year-old Melia was diagnosed with testicular cancer. Music has been a major part of Melia’s life; he grew up playing the guitar and was a member of a few bands. So, when it came time to begin his treatment, he made sure to bring his headphones to every session.

“Music helped pass the time when I was too tired to even watch TV,” he says. “I found peace in the melodies and encouragement in the lyrics.”

Melia found a deep connection to the central themes of resilience and survival in “Baroness” by Chlorine & Wine, which was released shortly after the band got into a serious bus accident. Another of his favorites was Lucero’s cover of “I’m in Love with a Girl,” originally recorded by Big Star – his wedding song. Melia found himself playing it as an ode to his wife, a reminder of how supportive and caring she had been through it all.

Steps to Make It at Home

Butternut Squash Macaroni and Cheese

Servings: 4

Ingredients:

- Uncooked, wholegrain macaroni (2 cups)
- Butter or heart-healthy spread (1 tablespoon)
- One small yellow onion, thinly sliced
- One small butternut squash, peeled and cubed (4 - 5 cups)
- Vegetable or chicken broth (5 cups)
- Low-fat milk or milk alternative (3/4 cups)
- Sharp cheddar or other cheese (1/2 cup)
- Sea salt (3 teaspoons)
- Salt and ground black pepper to taste

Instructions:

1. Preheat the oven to 325 F. Using a large saucepan, cook macaroni according to the package directions. Use a strainer to drain the macaroni, and set aside in a large bowl.
2. In a large skillet, heat butter over medium-low heat and add the onions, sautéing until golden for about 15 - 20 minutes.
3. In a blender, add the broth and bring to a boil. Add cubed squash and cook until tender for about 7 - 8 minutes.
4. Remove a 1/2 cup of the broth, drain the squash, and add it to a blender. To this, add the 1/2 cup of broth, onions, milk, and salt. Puree until completely smooth. Add the pureed squash mixture and cheese (reserving 1/4 cup) to the pasta and stir to melt the cheese and evenly coat the pasta. Place in an ovenproof dish, top with the remaining cheese, and bake for 15 minutes.

This content was adapted from Zakim’s Kitchen: Healthier Spins on Holiday Favorites, an event by the Leonard P. Zakim Center for Integrative Therapies and Healthy Living at Dana-Farber.