

## INTRODUCTION

# DIAGNOSIS

**T**he words “infiltrating ductal carcinoma” shocked and then numbed me. I could not believe what I had just heard. As the impact of that potential death sentence began to sink in, wild and uncontrollable panic seized me. “Oh, no!” I cried, “Oh, no, no....” The devastating words of the diagnosis of cancer echoed in my head as I fought back dizziness and nausea. I felt I was in some horrible nightmare from which I was about to awake.

Just minutes before, while waiting to hear the results of the biopsy from the pathology lab, I had been sure—in fact, certain—that the offending growth was benign. I kept telling myself that everything was going to be just fine—just like it had always been every other time in my life when tragedy threatened. Hadn’t I always done everything I was supposed to? As the reality sank in, I felt totally alone. No one heard my silent scream, “This is not fair!”

I’d always eaten a “well-balanced” diet and had even sworn off red meat years before. I’d gotten plenty of exercise and, in fact, had even run marathons. I’d had frequent medical check-ups that included regular mammograms and had religiously examined my breasts every month.

How could this have happened? And why to me? Things like this happen only in movies—or to other people, I thought. I’d always led a relatively conventional life—healthy, successful, always playing by the rules. I’d even been dealt a good hand in the game of life, attractive enough to win a few beauty contests and have three appearances in the TV series, “Hawaii 5-O.” I was well educated, held an engrossing, well-paying job as a GS-13 military logistician that involved traveling all over the world. All four grandparents

had lived to the ripe old age of ninety, so I knew I had some pretty good genes. I had what I thought was a good, solid marriage and two bright, beautiful, and successful children. My life could not have been better!

So why this avalanche of devastation? It was both a life and a death sentence for me. It was a “life” sentence because there’s still no real cure for breast cancer and a “death” sentence because breast cancer is a major killer of adult women, striking one out of every seven or eight American women. It happened also to be the number one killer of women in my age group.

“My God, what do I do now?” I asked the two surgeons who were attending me. “More surgery,” the senior surgeon said. “I’d recommend a modified radical mastectomy since the tumor was so large.”

I’d talked the surgeons into letting me watch the first operation (against their better judgment, they said). Instead of general anesthesia, I had had only a local anesthetic, and, therefore, had witnessed the surgeons carving a chunk the size of a golf ball out of my right breast. Thinking that I surely must be exaggerating the size of the mass in my mind, I kept trying to diminish the image. No, it was still horribly big, no matter how I visualized it.

The type of surgery the doctors now recommended would remove the breast tissue that remained after the biopsy, the fascia covering the chest muscles, the skin covering the breast area, the nipple, and all the lymph nodes in the axilla, or armpit. A lumpectomy was out of the question because there were cancer cells beyond all the margins of the tissue sample. The surgeons told me that, after the surgery, there would be tests to determine the spread. As it turned out, two of the tests turned up positive, both evidence of the spread of the cancer. There was a positive bone scan, and the chest x-ray indicated a “lesion” in my left lung.

By this time I was feeling betrayed by my breasts, so there was no problem in getting me to agree to the surgery—not even twice. When the surgeons suggested that when I recovered from this first surgery they would take the other breast, I was ready to hand both breasts over, although I was given no assurance that this would save my life, even with chemotherapy and radiation. This is because it is the nature of cancerous tumors to start shedding cells, which spread to

distant parts of the body. So cutting off breasts at this point was akin to closing the barn doors after the horse has escaped. Adding chemotherapy and radiation added no promises, either.

The doctors (there were now three of them in the room) shook their heads in answer to my next question and said, “We don’t know if you have three months, three years, or how long. We don’t know if it has spread or, if it has, how far. We certainly don’t know why; there’s an awful lot we just don’t know....”

Adding to my anxiety, I recalled that when I came in earlier that week, the doctor had looked at the plainly visible lump in my breast, and had asked with great concern in his voice, “Why did you wait so long to come in?” I went into instant panic and at the same time flew into a rage.

“What do you mean ‘wait so long?’” I practically screamed. “I was just here three months ago and was told this... this....” I was sputtering by now. I calmed myself down, took a deep breath and said, “They told me this lump was only scar tissue from the previous biopsy.” Six months before, I’d tried to tell them that this “scar tissue” was growing, but was repeatedly reassured that it was not and that everything was “normal.” Three years before, I’d found the lump and was assured that it was “nothing to worry about.”

“Never mind,” he said, “We’ve got to schedule surgery right away.”

I suddenly realized that the previous biopsy a year earlier had missed the cancer. Now it might be too late!

Having breast cancer was bad enough. To find out that the cancer had been growing in my breast for three years because of the inexperience, ignorance, or arrogance of a doctor was almost more than I could bear.

With eyes brimming with tears, I was experiencing the worst moment of my life. I wanted to scream, yell, hit out, rage, vent my fury, roll over, and die.

“Hey, wait a minute,” I thought. I’m not ready to roll over and die. I was fighting to live, and was going to fight this death sentence with everything I had. So, how could I afford to get angry at the very people I was counting on to help save my life?

If I had only a short time remaining, I needed to get busy. I had a lot of work to do. Thus began my Race for Life.

## The Operation

Unfortunately, detaching me from my breasts wasn't that simple as it entailed fairly extensive surgery. But it wasn't that difficult, either. When I checked into the hospital for the mastectomy, the nurses who helped me unpack were amazed to see three complete sets of running clothes, three sweat bands, two pairs of running shoes, and not much else. I didn't bother with bras and regular clothing, feeling that I wasn't going to need them. I could see them shaking their heads as they walked out of the room. What they didn't understand is that I'd been a daily runner for fourteen years at that point and wasn't about to let this stay in hospital interrupt my routine any more than absolutely necessary.

On the morning of surgery, the head nurse walked into the hospital room to administer the pre-operative medication, the drugs routinely given to patients to allay anxiety and relax them. The bed, however, was empty.

"My God," the head nurse said to her aide. "She's run away! And we thought she was taking this so well." I'd been told the day before that the pre-op medication would be given to me at 5:00 a.m. I'd set my alarm for 4:00, crawled out of bed, slipped into my running clothes, tip-toed down the shadowy halls, and escaped into the still-dark hills surrounding the hospital. I covered six miles, enjoying one of the most satisfying runs ever.

All the fear, tension, stress, anxiety, and even the anger seemed to drain away and be replaced by a powerful feeling of being an Army general in charge of waging a war on a battlefield, my chest! The surgeons (four of them now!) were the colonels in charge of the operating room front; the nurses were in charge of the mop-up operations; and the rest of the medical support personnel, with their needles, tubes, and various areas of expertise, were awaiting their call to arms.

At the end of the sixth mile, I was ready to do battle. As I turned back to the hospital and approached the entrance, I was shocked to see my surgeon just arriving. He was even more shocked to see me! "What in the *world* are you doing here?" he asked incredulously. I actually felt a pang of guilt, because I felt sure that they'd never have given me permission to run if I'd asked.

As it turned out, the staff most certainly would not have allowed me to run. When you run, you sweat. Sweating causes dehydration. On the day of surgery, you can't eat or drink anything from the previous midnight on, so you tend to be a little dehydrated anyway. So, here was a sweaty, thirsty, and dehydrated patient "presenting," as they say, to surgery. The head nurse was chewed out for not keeping a closer eye on her charge, and the surgeon told the anesthesiologist to pump some extra intravenous fluids into me to compensate for the dehydration. The problem, however, was they had trouble getting the IV started because of my dehydration. It took three people and many "sticks" before getting into a vein. The surgeon walked in, saying, "Would you believe that this lady was out *running* this morning?" Under the influence of the numbing pre-op medications, I muttered, "See! No problem with running the day of surgery...."

The surgery went very well. I was wheeled from the operating room to the recovery room. As I was coming out of the anesthesia, I was already thinking about starting the exercises that the American Cancer Society's Reach to Recovery support group recommends. Because I was still pretty numb, I felt no pain and was raring to go. As I was trying to lift my arms, the surgeon walked in.

"What are you trying to do?" he asked, looking perplexed.

"I've got to get started on my exercises!" I told him.

He patted me on the shoulder and said gently, "I think we can wait a couple of days."

"Oh, okay," I said, and immediately fell back to sleep.

The next time I awoke, I *couldn't* move my arm. Each time I tried, there were sharp, stabbing pains. For a while, I tried just to "gut" through the increasing pain, but then I had this fuzzy series of thoughts: this is only temporary; there's no point in suffering like this; I might as well be comfortable; that's what pain medication is for. Finally, I succumbed to the siren call of the medication and slept.

The next day I was feeling a lot better and began to wonder when I could run next. When the doctor came by to check on me that morning, I asked him.

"As soon as you feel like it," he said.

"Well," I replied. "*When* do you think I'll feel like it?"

He chuckled and said, “Oh, knowing you, probably in a couple of weeks.” He beamed as though he thought that was just *wonderful* news.

“A couple of weeks?” I replied. I was expecting him to say a couple of days! I was thinking of all the conditioning I’d lose by not being able to run for two whole weeks.

After he left, I got out of bed and started walking up and down the halls, pushing an IV stand, and prepared my body for a possible run the next day. That night I awoke a number of times, the pain still intruding on my sleep. My body required more medication and more time. The second day after surgery I was still a little weak and shaky on my feet. Disappointed, I thought, “Will I ever get back to running again?” It had been two whole days but it seemed like a month. On the third day, however, I felt great. “Today’s the day!” I announced.

I think the poor nurses were in awe of this running-obsessed patient and yet they were totally supportive. I asked for a wide bandage to wrap around my chest. They brought me a twelve-inch wide Ace wrap which they then helped me swaddle myself with so that nothing could move—not that there was much left to bounce. But when the bandages were snug around me I found I could move with a lot less pain.

Triumphantly, I walked out of the hospital and broke into a tentative, gingerly jog. It felt wonderful! Tears came again to my eyes. But this time they were tears of joy.

## A Race for Life

This book is the story of how I decided to turn my life around through a combination of three things: diet, extensive fitness training, and a can-do attitude. All three, I believe, have been vital in making sure that nearly twenty years after my operation, I not only have not had any further recurrence of the cancer, but am fitter, healthier, and happier than I have ever been.

In this book I talk about how important a plant-based diet is in creating optimal health and providing the right nutrients for strength and fitness. I also offer my experience of taking part in some of the toughest races in the world, and how I have found great companionship, personal fulfillment, and life-altering challenges in them.

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Thirdly, I provide practical insights into training your body and creating a positive attitude to all of life's challenges.

If all this seems a little overwhelming, then I don't blame you. It was overwhelming for me too at first. But I deeply believe that I am no more special or committed a person than anyone else. Like you, I have had moments of fear and doubt when I have not known where to turn. But I also believe that we all have the resources in our minds and our bodies that make no challenge insuperable and can provide us with a lasting sense of achievement. As I enter the second half of my seventh decade, I have neither felt better nor looked forward to life with more pleasure. I hope that my story inspires all of you—no matter how old you are or how physically challenged you may be—to stretch your capabilities and throw off the stereotypes of what someone your age or physical condition can do. If you are anything like me, you'll be amazed at what you can do! Moreover, if you follow some of the plans and ideas in this book, you'll get results. Why don't you join me in the race for life? I guarantee you will see results.