



# The AMBER Report

ISSUE 7

JULY 2017

## SPECIAL POINTS OF INTEREST:

- **Bust a Move 2017**
- **What is PMPS?**

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Check out our website and let us know if you want to be involved in our new Facebook group!



[www.amberstudy.com](http://www.amberstudy.com)

Summer is here! Hope you are enjoying the warm weather! In this edition we highlight the fundraiser Bust a Move and profile our Edmonton study coordinator Stephanie Voaklander.

This July we will send out our first 5 year questionnaire package. In addition, we recently we sent out a participant survey by email. This survey is part of a summer project that allows us to gain valuable feedback as we move forward

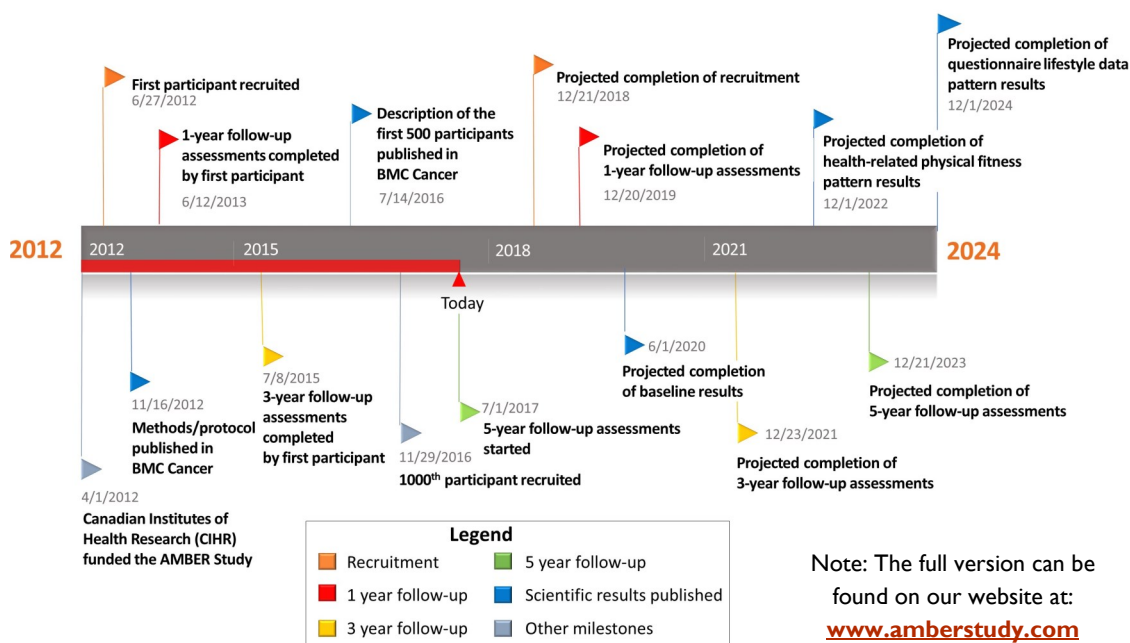


Calgary AMBER Team (L to R): Megan Farris, Trisha Kelly, Leanne Dickau, Dr. Christine Friedenreich, Heather Boersma, Sue Daniel & Lauren Voss.

with the study. We are often asked about timelines for when results will be published. Due to the nature of the AMBER study we are still a number of years away from collecting all of the data. Below is a projected timeline for the next 7 years with respect to study progress and milestones we hope to reach.

Currently the study has enrolled 74% of the 1,500 participants we hope to recruit and retain in our study. As of June 2017, we have enrolled 599 participants in Calgary and 512 in Edmonton. To date, 742 participants have completed their year 1 assessments and 265 participants have completed their year 3 assessments.

As always, thank you again for your ongoing commitment to the study!



Note: The full version can be found on our website at: [www.amberstudy.com](http://www.amberstudy.com)

# BUST A MOVE

## ON MAY 13, 2017



The 6<sup>th</sup> annual Bust a Move took place on May 13th in Edmonton at the Butterdome on the U of A campus. Hundreds of men and women donned their best and brightest spandex for this fitness extravaganza raising breast cancer awareness as well as funds in support of the clinical trials unit at the Cross Cancer Institute.

This year workouts included: yoga, barre, kickboxing and Bollywood dancing and Stephanie Voaklander, one of our AMBER Edmonton Study Coordinators joined in on the fun too!



### What is Bust a Move?

Bust a Move is a full day event bringing together hundreds of men and women of all fitness levels to participate in 6 hours of activity taught by the Edmonton fitness community. The event included lunch and snacks from local providers and free mini massages from massage therapy students.

### How much money has been raised?

Over the past six years over \$2.1 million has been raised in support of the Clinical Trials Unit at the Cross Cancer Institute. This money helps to bridge the gap between research ideas and clinical practice, ultimately bringing the results to patients and their families faster.

### Why did you “Bust a Move” Stephanie?

While working on the AMBER Study for the past four years, I have seen the value in the how these research dollars are spent and the effect that an increased knowledge base has on clinical practice.

When the Barre Studio I am a member of volunteered to run a session and have a team, I signed up right away! I saw Bust a

Move as the perfect challenge to raise money, awareness and have a fun workout to boot! I would definitely recommend this event for next year for anyone who may be interested!

### Where can I find out more information?

You can check out this year's website at: [www.albertacancer.ca/bustamove2017](http://www.albertacancer.ca/bustamove2017)

Keep an eye on the [Alberta Cancer Foundation website](http://www.albertacancer.ca) for 2018 event info!





# Get to Know Stephanie!

Stephanie Voaklander is one of the Study Coordinators for the AMBER study in Edmonton. She has been with the study since the very beginning first working part time in 2012 and then moving to a full time position in 2013 .

She graduated with a BSc in Kinesiology in 2010 and completed a Bachelor's of Education in 2013.

**What's your favourite thing to do in Alberta in the Summer?**

Camping! There are so many beautiful campgrounds around Alberta to explore. We try to check out at least one new campground every year.

My favourites are the really densely forested in sites. I'm not a very active camper so I go for the peace, quiet and fresh air. Turning off my cell phone for the duration of the trip is a must!

**Tell us about your Pet?**

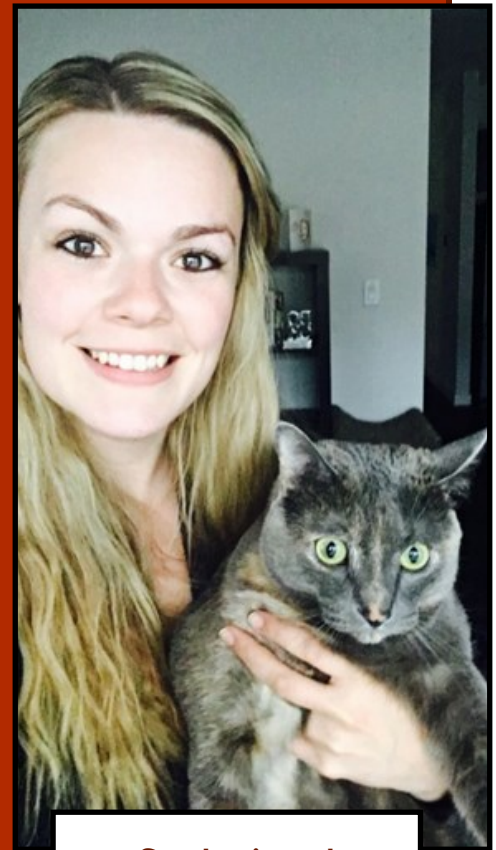
I have a cat named Reba who has the biggest personality and is an absolute brat, but I love her. Her eyes are always wide as saucers and looking for mischief – usually finding it!

**If you could ban one food what would it be?**

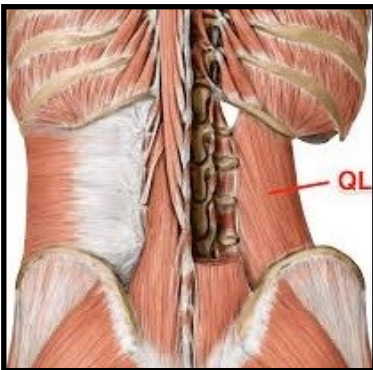
Fish and seafood! Specifically the sardines that Diane eats for lunch in our shared office :) )

**What's your favourite sport to watch?**

Hockey! I have always been a huge Oilers fan and attend as many games as possible each year. This year's playoff run was a blast and I have yet to take the flag off my car! I also enjoy going to football games and have season tickets to the Eskimos.



**Stephanie and her cat Reba!**

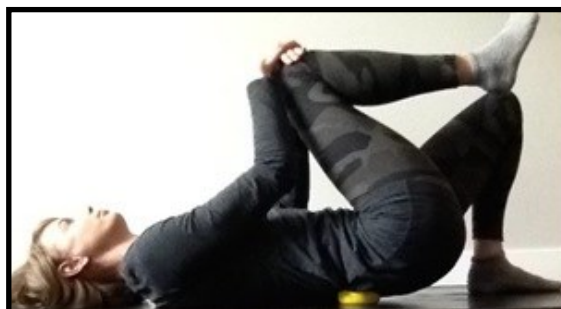


The quadratus lumborum (QL) is located in the lower back and connects the pelvis to the spine. Tightness of this muscle is a common source of low back pain.

1. Lie on your back with your knees bent and feet on the floor.

## Rolling With Jenna

2. Place the ball on one side of your spine between the bottom rib and top of your hip bone.
3. Roll the ball over the area until you find an area of tenderness
4. If you want more pressure hug your knee to your chest on the same side that the ball is (see below).
5. Hold for 20-30 seconds and then release.

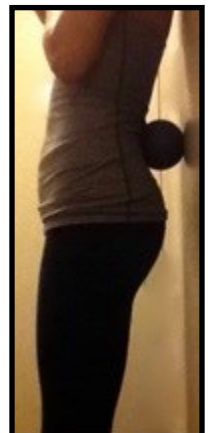


6. If lying on the ball is too much pressure the exercise can be performed standing by placing the ball between your back and a wall (see below).

Note: Rolling can be slightly uncomfortable but should not be overly painful. Make sure to reduce pressure if this occurs.

*Talk to your doctor or another health professional before starting any new exercises.*

*For additional exercises, check out our past newsletters on the AMBER website.*



# What is Post-Mastectomy Pain Syndrome?

Post-mastectomy pain syndrome (PMPS) is pain that persists beyond the expected period of healing, occurring at 3 months or longer following surgery<sup>1,2</sup>. It is reported that approximately 40% of women may experience this type of pain after being treated surgically<sup>1</sup>. Please note that developing PMPS does not signify a recurrence in cancer.

This type of pain is thought to be related to neuropathic (nerve) pain as result of surgical nerve injury or changes to sensory nerves<sup>1</sup>. It may also be caused by scar tissue that develops in these nerves after surgery<sup>2</sup>. Pain may be felt in the chest, armpit or arm on the side of the surgery and may get worse when moving your arm or shoulder. The pain can be dull/achy or sharp/stabbing or some women may feel burning or numbness in the area. PMPS is most common in women who have had a mastectomy, however, some women develop pain after breast-conserving surgery (lumpectomy) or an axillary lymph node dissection. Psychosocial factors such as anxiety, sleep disturbance, depression, and poor coping strategies may also be related to the development of chronic post-surgical breast pain<sup>1</sup>.

Overall, there is limited research or consensus in regards to the treatment of PMPS. For pain relief, medical professionals may prescribe anti-inflammatory agents such as ibuprofen or low-dose antidepressants. A few studies have shown a significant decrease in pain for patients prescribed antidepressants, however, the sample size of the studies was small<sup>3</sup>. In regards to surgical treatment, fat grafting has been shown to decrease pain in patients with PMPS but further research is needed<sup>3</sup>. Other therapies to improve physical and psychosocial health of women such as physical therapy, acupuncture, or counselling may also be of benefit.

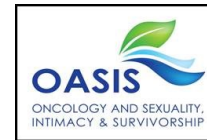
If you are experiencing these symptoms, contact your medical professional in regards to possible treatment and/or therapies.

## References:

1. Lancaster, R.B., Balkin, D., & Esserman, L. (2016). Post mastectomy pain syndrome management. Current Surgery Reports, 4:13.
2. Canadian Cancer Society Website – [www.cancer.ca](http://www.cancer.ca)
3. Larsson, I.M., Sørensen, J.A., & Bille, C. The post-mastectomy pain syndrome: A systematic review of treatment modalities. The Breast Journal, 23 (3), 338 – 343.



## Online Sexual Health Resources for Cancer Patients



One of the most commonly cited life-disrupting, long-term side effects of cancer and its treatments are those associated with sexual dysfunction and fertility. Patients often struggle to get answers to questions such as:

**When it is safe to have sex? Will I ever feel like having sex again? How do I get help?**

The OASIS—Oncology And Sexuality, Intimacy & Survivorship-- Program is a sexual health program specifically for those living with and beyond cancer. Now patients can get answers to any questions in the privacy of their own home. Text and video resources are available on MyHealth.Alberta. <https://myhealth.alberta.ca/HealthTopics/cancer-and-sexuality>

Patients (and their partners) can also find about a variety of in-person programs and services that are available in Calgary and Edmonton, and how to access Telehealth consultations that are available to patients across the province. For inquiries or referrals call OASIS:

**Calgary (403) 355 - 3246 or Edmonton (780) 432 -8260**

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