



Barbara Lambert

**SURVIVOR**



**OCTOBER 2021**

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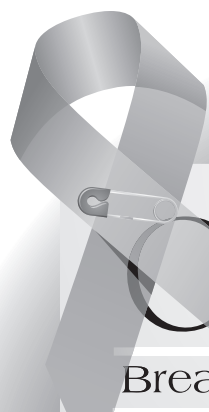
# Survivors

They continue to persevere and provide advice to other women about their health



Kelsey Brady

**SURVIVOR**



# OCTOBER

## Breast Cancer Awareness Month

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### *Did you know?*

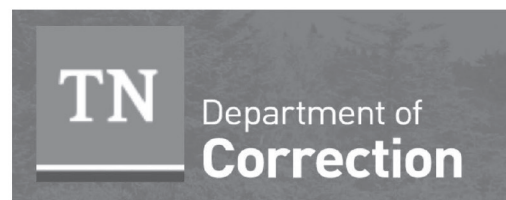
Pathology reports are documents that contain diagnoses after doctors have examined cells and tissues under a microscope. According to the National Cancer Institute, pathology reports, which play an important role in diagnosing and treating cancer, also may contain information regarding the size, shape and appearance of a specimen as it looks to the naked eye. People who are diagnosed with breast cancer may receive pathology reports that indicate the presence of tumor necrosis. According to the nonprofit organization Breastcancer.org, the presence of tumor necrosis means that dead breast cancer cells were found within the tissue sample. Tumor necrosis, though it is often limited to a small area within the tissue sample, suggests a patient is battling an aggressive form of breast cancer.



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# Barbara Lambert says support system is key

**RACHEL AUBERGER**  
contributor

Cancer survivors are strong. Cancer survivors are courageous. Cancer survivors are warriors. Cancer survivors are also weak and scared and humble and sad sometimes. But that's OK, because, on those days, their support system will carry them through until they feel strong and courageous again.

Barbara Lambert, a 17-year breast cancer survivor says her support system is what got her through her darkest days and is what still gets her through those days that she doesn't feel like a warrior. She also said she is honored to be part of a great system where she can be "that person" for someone else on the days when she is strong and courageous and fierce.

Lambert was diagnosed with breast cancer, in January 2004, at the age of 57. The diagnosis came after a routine mammogram showed a very small nodule deep in her breast, something that would have been undetectable through self-checks or observation.

"I remember going to the doctor early that morning to get my results and just being in complete shock," Lambert said of receiving the news. "Breast cancer didn't run in my family, so I had no thoughts that this would happen to me. I was in such shock I just went back to work and didn't tell anyone all day long."

Of course, it wasn't the type of news that, after she processed what she had been told, Lambert could keep to herself. Once she began telling her family, a support system began forming around her.

"I remember Barbara Sorrell called me and started talking to me about what to



expect, and how to prepare, and how to be OK with needing support," Lambert recalled, saying that she didn't even know Sorrell but their husbands worked together and connected the women. "Survivors are quick to do that - reach out and let you know you aren't alone and be willing to share your journey with you."

Breast cancer survivors reach out to help newly-diagnosed patients not only in the beginning of their journey but throughout the following days and months. They selflessly make sure no one has to walk alone or feel isolated.

"People used to try to shy away from being near someone who had cancer,"

she said. "I think they don't know what to say or do. I even know a woman whose family disowned her after she had to have a mastectomy. That's not what we need or want. Support is so crucial to the healing process."

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## Breast Cancer Awareness Month

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Lambert went so far as to say that she welcomes questions from the general public about her journey.

"If you know I've had cancer and you have questions - I don't mind if you stop and ask me," Lambert said. "I am willing to share my experiences so that maybe other women will be able to have their cancer detected early and have a greater chance of survival or so that they will know what to expect during their own treatments or even a family member will know how to better support someone going through their own cancer treatments. I don't mind at all if people ask me about it."

As for Lambert, her treatment for the 0.2 cm mass that showed up on the mammogram was quite aggressive. She underwent 35 radiation treatments that have disformed her. She had six chemotherapy treatments - the third of which made her so sick that she lost 40 pounds, causing her doctor to prescribe another medication that she had to go get the day after each of her three remaining treatments to keep her from getting any weaker. She had a lumpectomy to remove the offending nodule. Additionally, she had 16 lymph nodes removed. She had to

take a daily pill for five years in an effort to keep the cancer from returning.

"I couldn't have done everything that had to be done without my support system," Lambert said. "Family, close friends, other survivors. And of course, my faith in God."

Lambert admitted that, while she had been in and out of church all of her life and was a Christian, she was not as faithful in her walk with the Lord as she is now.

"Now I wake up every morning and I meditate, and I pray, and I thank Him for just letting me see another day," she explained. "My cancer experience brought me closer to God, and now I am stronger and more faithful and more deeply involved in my church."

Lambert said life is different now, even 17 years after her diagnosis. She doesn't have cancer but knows that she could, at any moment, receive that news again. And while she lives with that thought tucked away in the back of her head, she instead chooses to focus on the wonderfulness of living so many days after becoming a cancer survivor.

"I see things differently now," Lambert said. "I see things I didn't used to even notice. I watch every sunrise and every sunset. I admire the green fields and the mountains, but I also see people, and I try

to love as many of them as I can. Family is number one. I love my family. And I just appreciate life. I am thankful for every single day that I have here on earth."

Lambert said she hopes other women who receive a diagnosis of breast cancer will reach out to one of the many support groups that are available to help them and not just while they are taking their treatments.

"We have a great group here at the YMCA, and we would welcome anyone who reaches out to us," Lambert said.

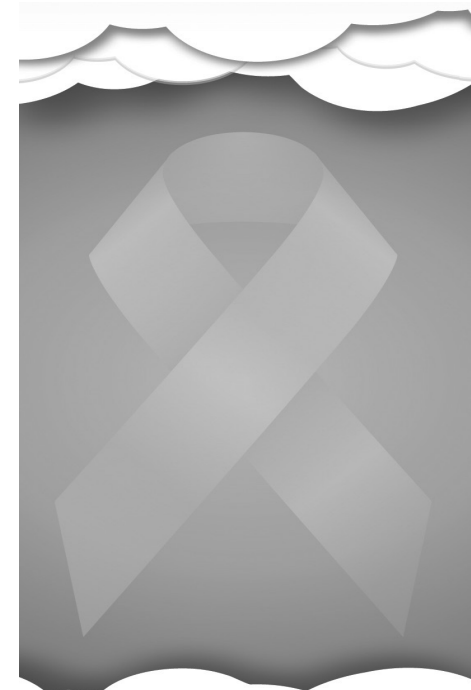
She said there are a lot of long-term survivors in the group who are willing to pick anyone up and hold them and walk down that road again and again if it will help the next person come through stronger.

"It's not just about cards and phone calls," Lambert said. "It's providing them with the physical and emotional support they need day after day for the rest of their lives. We want to encourage them to stay strong and to keep moving forward and to look for sunshine and to keep looking toward their future. We want them to make life a little better for them if we can.

"Breast cancer isn't something you can't overcome. It can be beaten. Even those of us who have been survivors for

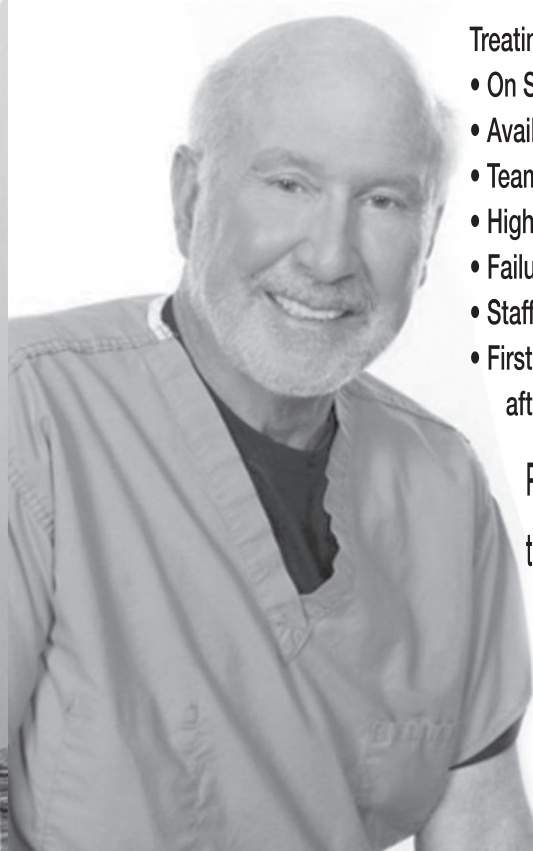
years and years still have moments where we are weak and tired and overwhelmed. That's when our support group steps up and carries us. We take turns being the strong one and making sure everyone feels loved and supported and never alone."

And that is how a true warrior survives.



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# How to manage pain medications during breast cancer treatment

Breast cancer researchers have worked tirelessly over the last several decades as they work to eradicate the disease once and for all. While breast cancer still affects millions of women across the globe each year, advancements in treating the disease have dramatically improved five-year survival rates, providing patients and

their families with hope as well as a realistic expectation of a long, healthy life after cancer.

According to Breastcancer.org, women diagnosed with breast cancer in 2020 and beyond have an array of treatment options to fight their disease. That marks a stark contrast from recent history, when treatment

options were considerably more limited. Though treatment options have expanded and improved survival rates, women diagnosed with breast cancer can still expect to confront some side effects as they navigate their way through treatment.

Pain is one of the more common symptoms breast cancer patients experience, both before diagnosis and during treatment. In fact, breast cancer treatment plans typically include strategies to address pain. Breastcancer.org notes that most breast cancer patients can get complete relief for their pain. However, it may take some time before the right formula is found and patients can return to enjoying daily activities.

The American Cancer Society notes that medication is typically part of cancer patients' pain treatment plans. Breast cancer patients unaccustomed to taking medication each day can consider these tips to effectively manage their medications as they progress through their treatments.

- Take your medication on a regular schedule. The ACS advises cancer patients who have been diagnosed with chronic pain to take their medications around the clock on a schedule, rather than taking it only when pain is severe. Schedules can be adjusted, but patients should not do so on their own. Pain medication schedules should only be adjusted after speaking with a phy-

sician.

- Familiarize yourself with pain medication side effects. Pain medications may produce side effects such as sleepiness and dizziness. The ACS notes that these symptoms typically improve after a few days, but cancer patients must recognize the threat they pose. Patients may need help getting up or walking, and the ACS discourages patients from driving while on pain medication until they are sure of the effects of the medicine.

- Do not crush or break pills. Many medicines are time-release medications in pill form. Taking broken or crushed pills can be very dangerous. Only patients who get the go-ahead from their physicians to take crushed or broken pills should do so.

- Monitor your side effects. No two people are the same, so some cancer patients may react differently to pain medications than others. Keep track of any abnormalities and side effects you experience while taking pain medicine. Discuss them with your cancer care team during each doctor visit, and report severe or uncomfortable symptoms to your physician immediately.

Pain medication can help breast cancer patients overcome a common side of effect of both their disease and their treatments. Learning to manage pain medications is vital for patients as they recover from their disease.







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# You are never too young

**RACHEL AUBERGER**  
contributor

In your 20s, life is supposed to be vibrant and adventurous as young people find love and start families and build homes and graduate school and start careers. Life isn't supposed to be about dooming diagnoses and dark days and painful nights and fear.

But for Kelsey Brady, getting a diagnosis of estrogen-positive, progesterone-positive, receptive breast cancer at the age of 24 means she is living life differently than other young moms.

"I'm like an old lady," she laughed. "I was diagnosed typical, old lady cancer - the type of breast cancer people associate with women in menopause."

Brady said she had first found the lump on her breast when it became painful, but her physician told her that a painful lump typically indicated it was non-cancerous. That, along with family members having a history of fibro edemas, led for the decision to not be concerned and to just monitor the lump for any changes.

"I really just accepted that I had a fibro edema and that was that," she said, but three months later, changes caused her to change that thinking. "The mass had grown, and now it was changing. It had started dimpling."

Brady was on vacation visiting her mother who convinced her that she should call her doctor and make an appointment to discuss the changes. A phone call to her doctor, an appointment set, and Brady was on her way back home.

"They sent me for a mammogram and then took me in for an ultrasound as well," she said about how her plans changed in the summer of 2020. "When the radiologist walked in, I knew. My world was about to change."

On July 31, 2020, Kelsey Brady was diagnosed with breast cancer and was about to undergo some very aggressive treatment in an effort to be sure she got to see her babies, who were just three and four years old, grow up.

Brady was sent to the Knoxville Comprehensive Breast Center and the full-detection-radiation center began ordering new tests.

"They thought maybe, just possibly, I had another type of tumor instead. But I knew. In my heart I knew," she said. "Finally, they did a biopsy and confirmed the diagnosis. My surgical oncologist told me that it was a miracle I was even at the center looking for a diagnosis. He said that most doctors don't listen to a woman my age trying to tell them something is wrong with their breasts. It's just not normal at 24. But cancer doesn't discriminate, and I am thankful that I was persistent and that my doctor listened when I said something was wrong."

The fateful diagnosis meant four months of chemotherapy. Both Adriamycin (Doxorubicin), or the "Red Devil" treatment and Taxol treatments had Brady traveling to Knoxville every other week and being really sick in between.

"My kids did so good," she said. "They knew mom was sick, but they really didn't understand. Still they tried to be helpful and good."



**Kelsey Brady**

After completing the intense, disabling chemotherapy treatments, Brady underwent a double mastectomy with reconstruction - a process that took a half dozen surgeries and several months to complete.

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"I think the worst of it all was that I couldn't bring my support people with me," Brady said, as she talked about the COVID-19 pandemic and how she had to sit alone at each treatment. "I was alone when they confirmed the diagnosis. I was alone when I received treatment. It was really, really hard."

Brady said she was given so much information, she wasn't always sure she was relaying it all to her family when she returned, but they stayed supportive. Her husband, mother, sisters, and in-laws were all patient with her and supportive every step of the way.

The process, however, is going to continue throughout her lifetime. Brady found out that she had a CHEK2 genetic mutation, meaning she has a higher-than-normal chance of developing more cancers.

"So basically, the CHEK2 gene is supposed to look at abnormal cells and not reproduce those. Mine doesn't work," she explained, saying that she will have to continue seeing an oncologist and watching for tumor markers likely throughout



her life. "I can have tumors everywhere throughout my body. We are going to have to be vigilant in monitoring what is going on and attempting to catch any future cancers early."

Brady has said the exhaustion has been immense, as not only has she undergone all of the breast cancer treatments but also had to have a hysterectomy. But

she is refusing to keep her head down, instead focusing on a brighter future watching her kids grow and be happy.

"I know this year I have changed my perspective. My mental changes have all been positive," she said. "I have had a lot of spiritual growth and readjusted my goals and focus. My goals used to be professional, trying to grow our family

business, but now I know that my focus needs to be my family first. I also have become more involved in my church life. I want to change lives and help others make positive choices and be a strong, positive voice for them.

"Physically it has been hard. Very hard. But that part's just temporary. I try to remember that. I will get through the physical struggles. The mental and spiritual growth - those are the things that I want to be sure are permanent."

Brady said she hopes her story can encourage other women - regardless of their age - to be persistent with their health care and insist their doctors listen to them. She also stressed the point that women need to listen to their bodies.

"No one knows your body better than you. No one knows what you are feeling and what is happening like you do," she said. "Tell your doctor. Make them listen. Make sure they are following up and testing and taking every change seriously. Don't let them dismiss you because of your age or inexperience or lack of 'other' health issues. It's your body. Speak for it. It will save your life."

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# Women have some control in regard to their risk for breast cancer

No one, regardless of their age, occupation, skin color, or socioeconomic status, is immune to cancer. In fact, individuals might be hard pressed to say no one in their family and/or circle of friends has been diagnosed with cancer at some point.

According to the National Cancer Institute, there were 18.1 million new cancer cases across the globe in 2018. Among women, when excluding non-melanoma skin cancer, no cancer was more prevalent globally than breast cancer. The World Cancer Research Fund reports that, in 2018, breast cancer accounted for 25.4 percent of all new cancer diagnoses in women. That figure is nearly three times as high as the percentage of cases of colorectal cancer, which accounted for the second most new cancer cases diagnosed in women in 2018.

It's understandable to be fearful of such figures, which can make a breast cancer diagnosis seem almost inevitable. However, the Centers for Disease Control and Prevention notes that not all risk factors for breast cancer are set in stone. Though age and family history, two known risk factors for breast cancer, may be beyond a woman's control, she still can exercise some control over other risk factors.

- **Physical activity:** The CDC notes that women who are not physically active have a higher risk of getting breast cancer than those who are. The Office on Women's Health, a division of the U.S. Department of Health & Human Services, notes that women should get two hours and 30 minutes of moderate-intensity aerobic physical activity every week or 75 minutes



- of vigorous-intensity aerobic activity each week. This should be accompanied by muscle-strengthening activities on two or more days each week. Carrying around extra weight can make moving around more difficult, so the Office on Women's Health urges larger women to start slowly if it's been awhile since they exercised. In addition, aging women can speak with their physicians for advice about exercise regimens they should or need not avoid.

- **Taking hormones:** The CDC notes that hormone replacement

therapies that include both estrogen and progesterone taken during menopause can increase a woman's risk for breast cancer when taken for more than five years. In addition, the CDC reports that oral contraceptives, such as birth control pills, have been linked to a higher risk for breast cancer. Women can speak with their physicians about how to control hormone-related risk factors for breast cancer.

- **Alcohol consumption:** Studies have found that the more alcohol a woman consumes the greater her risk for breast cancer

becomes.

Smoking, exposure to chemicals that have been found to cause cancer and changes in hormones related to working night shifts are some additional risk factors for breast cancer that women may be able to control.

Breast cancer affects millions of women across the globe each year. Though that may instill a feeling of helplessness, women should know that many risk factors for breast cancer are within their control.

# Are there different types of breast cancer?



Millions of women are diagnosed with breast cancer every year. According to the Breast Cancer Research Foundation, more than 2.3 million women across the globe were diagnosed with breast cancer in 2020. The BCRF also notes that breast cancer is the most frequently diagnosed cancer among women in 140 of 184 countries worldwide.

Breast cancer statistics can give the impression that each of the millions of women diagnosed with the disease is fighting the same battle, but breast cancer is something of an umbrella term. In fact, there are various types of breast cancer, including ductal carcinoma in situ, invasive ductal carcinoma, inflammatory breast cancer, and metastatic breast cancer. Learning about each type of breast cancer can help women and their families gain a greater understanding of this disease.

## Ductal carcinoma in situ (DCIS)

DCIS is a non-invasive cancer that is diagnosed when abnormal cells have been found in the lining of the breast milk duct. The National Breast Cancer Foundation notes that DCIS is a highly treatable cancer. That's because it hasn't

spread beyond the milk duct into any surrounding breast tissue. The American Cancer Society notes that roughly 20 percent of new breast cancer cases are instances of DCIS.

## Invasive ductal carcinoma (IDC)

IDC is the most common type of breast cancer. The NBCF reports that between 70 and 80 percent of all breast cancer diagnoses are instances of IDC. An IDC diagnosis means that cancer began growing in the milk ducts but has since spread into other parts of the breast tissue. This is why IDC is characterized as "invasive." Though IDC can affect people, including men, of any age, the ACS notes that the majority of IDC cases are in women age 55 and older.

## Inflammatory breast cancer (IBC)

The NBCF describes IBC as an "aggressive and fast growing breast cancer." Breastcancer.org notes that IBC is rare, as data from the ACS indicates that only about 1 percent of all breast cancers in the United States are inflammatory breast cancers. Many breast cancers begin with the formation of a lump, but Breastcancer.org reports that IBC usually begins with red-

dening and swelling of the breast, and symptoms can worsen considerably within days or even hours. That underscores the importance of seeking prompt treatment should any symptoms present themselves.

## Metastatic breast cancer

Metastatic breast cancer may be referred to as stage IV breast cancer. When a woman is diagnosed with metastatic breast cancer, that means the cancer has spread, or metastasized, into other parts of the body. The NBCF indicates that metastatic breast cancer usually spreads to the lungs, liver, bones, or brain. Symptoms of metastatic breast cancer vary depending on where the cancer has spread. For example, if the cancer has spread to the lungs, women may experience a chronic cough or be unable to get a full breath.

These are not the only types of breast cancer. A more extensive breakdown of the various types of breast cancer can be found at <https://www.breastcancer.org/symptoms/types>.





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### **Women should...**

- have the choice to start annual breast cancer screening with mammograms (x-rays of the breast) if they wish to do so at ages 40 to 44
- get mammograms every year at ages 45 to 54
- switch to mammograms every 2 years, or can continue yearly screening at age 55 and older
- be familiar with the known benefits, limitations, and potential harms linked to breast cancer screening
- know how their breasts normally look and feel and report any breast changes to a health care provider right away