



Thry'vors News

Volume 4, Issue 2

Spring 2006

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This is the 11th in a series of seasonal newsletters, from the Canadian Thyroid Cancer Support Group (Thry'vors) Inc. Your comments and suggestions are most welcome.

Please direct your comments to Newsletter Committee at thryvors@sympatico.ca

Thyroid Cancer and Memory Loss

by **Scott Hagwood**

Memory, defined in its irreducible form, is an experience. It is often captured in a personal story but I wish to borrow this Sufi tale as an allegory for mine:

Once upon a time, there was a wise old man and a young man who lived in a small village. One day the young man decided to outfox the wise old man. So, he decided to capture a live sparrow in his hands and ask the old man to tell him in front of all the villagers whether the bird in his hand was alive or dead. If the old man said "alive" the young man would then crush his hands together to kill the bird and prove the old man wrong. If on the other hand, the old man said it was "dead" the young man would open his hands and let the bird fly away. This would also prove him wrong.



So the young man captured a live bird, gathered the villagers, and walked up to the old man's house. He knocked on the door and said, "Old man, I have a question for you, is the bird in my hands dead or alive?" The old man thought about it for a minute and then replied, "The answer is in your hands."

When I was diagnosed with thyroid cancer, at age 36, I felt much like the bird in the young man's hands. I was a simple victim of
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www.thryvors.org

Canadian Thyroid Cancer Support Group (Thry'vors) Inc.

PO Box 23007
 550 Eglinton Ave. West
 Toronto, ON M5N 3A8

Phone: 416-487-8267
 Fax: 416-487-0601
 Email: thryvors@sympatico.ca



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Why Are You So Hyper?

by Andrea Peca

Over the last couple of months, I have heard so many ask me why I am so hyper. What my family, friends and co-workers are commenting on is my inability to sit still, the fact that I am talking faster than I can think, and have an amazing amount of energy. I have often had these thoughts myself, but my concern is deeper than this. I wonder why I am mixing up my words, or why my memory is not the same as it once was. My heart races and I feel agitated and nervous all the time. To concentrate on one task at a time seems impossible, and the feelings of sadness sometimes seem to overwhelm me.

At first I thought that maybe everyone is right, I am "hyper", as in having a very excitable or nervous temperament. Seemed a little strange and at my most recent visit to my doctor, he was able to confirm that things weren't as they should be. From speaking with me, he agreed that I am hyper, but he is referring to the condition of being hyperthyroid.

After having my blood work tested, it revealed that my TSH (Thyroid Stimulating Hormone) level was extremely low. This resulted in a reduction in my medication dosage. After only a couple of weeks, I am feeling better. Though I will miss my energy level, I am sure those who spend their day with me are looking forward to some peace and quiet.

Always be aware of any changes in your body. Speak with your doctor if you experience a few of the symptoms listed below.

Some symptoms of Hyperthyroid Condition: anxiety, breathing difficulties (shortness of breath), increased bowel movements, depression, excessive mood swings, fatigue, hypersensitivity to heat, increased appetite, insomnia, forgetfulness, muscle weakness, palpitations, sexual dysfunction, rapid heart beat, inability to concentrate.

For more information on the symptoms of hyperthyroidism, please visit: www.endocrineweb.com/hyper1.html

Did you know...?

by Tara Gallagher



Surgery to remove the thyroid can result in accidental damage to the parathyroid glands. Damage of three or more of the four rice kernel sized parathyroid glands can result in Hypocalcaemia or low calcium. When the calcium level drops, symptoms may include tightening of the muscles, painful muscle cramps, and a tingling (or "pins and needles") sensations. It can be quite unpleasant and potentially dangerous.

Sometimes the parathyroid glands are simply stunned from the surgery and can eventually begin to function.

When the calcium levels fail to rise to normal your doctor may prescribe vitamin D (Rocaltrol or calcitriol) and calcium supplements. Dosage will depend on the blood level of calcium. It is important to keep calcium in the normal range. Your doctor will check your blood fairly frequently after surgery to ensure your calcium level is normal.

For more information please visit Hypoparathyroidism Association - <http://www.hypoparathyroidism.org/> or <http://www.endocrineweb.com/hypopara.html>

What cancer can't do...

Cancer is so limited,
it cannot corrode **faith**,
shatter **hope**,
silence **courage**,
weaken **strength**
or cripple **love!**



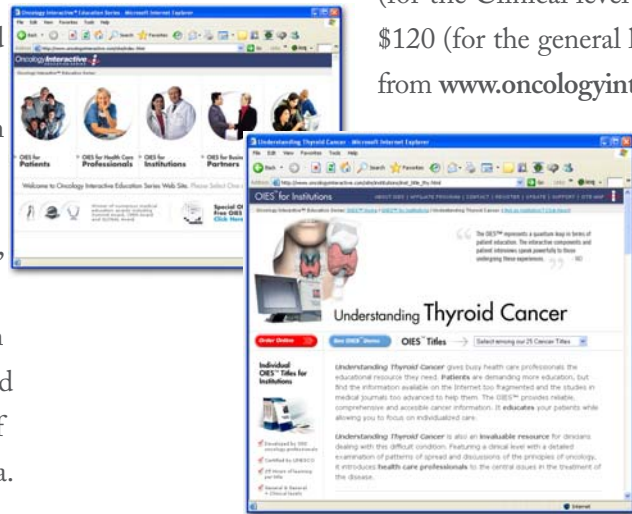
Interactive CD Resource

by Rita Banach

Understanding Thyroid Cancer is one of 30 CD-ROMs in an Oncology Interactive Education Series, available from Jack digital productions.

This two CD set gives brief, understandable explanations concerning various thyroid cancer related issues, most accompanied by visuals such as pathology slides, photos or diagrams. It also includes animations and short videos. The paths to various pages and topics are easy to follow and great for visual learners. Most of the information is very basic and follows a logical course from diagnosis to treatment to follow-up. The educational material would best suit a newly diagnosed person, although I would imagine that it contains more information than a person is able to take in all-at-once during an initial viewing.

There are some questionable inclusions in the presentation, such as descriptions of some types of scans very rarely given. As well some of the recommendations are debatable, such as drinking plenty of water following a treatment of RAI and sucking on sour candies. And, some information is out of date concerning the availability of Thyrogen® in Canada.



The diagrams of cervical (neck) lymph nodes were interesting – I didn't realize they form chains in the neck. Also, I didn't know that Follicular tumours are more likely to be unifocal, and less likely to metastasize to lymph nodes; whereas, Papillary cancer is often multi-focal and less likely to metastasize to lung and bones.

If you'd like to view the CD, it is available for loan or can be accessed on the corporate Intranet of Princess Margaret Hospital, Toronto. It is also available for purchase for \$200 (for the Clinical level version) or \$120 (for the general level version) from www.oncologyinteractive.com

Iodine and Salt

by Nancy Williams, PhD FDC

Sodium and Iodine, both found in table salt in Canada, are not the same. Sodium is a mineral that is a natural component of most foods that we eat. Salt is 40% sodium and 60% chloride and thus has the chemical name sodium chloride. You will find the sodium content of foods included in the Nutrition Facts tables that are now required on all packaged foods in Canada.

As a public health measure, all table salt sold in Canada must be "iodized" or fortified with the mineral iodine.

As well, iodine is a natural component of some foods, especially those from the sea like fish, seafood, kelp and sea salt, but many more too. Sodium is not a problem while on the low iodine diet but iodine intake must be restricted well below our usual intake. You will not find the iodine content of foods listed in Nutrition Facts tables. Instead, check the ingredient listings on packaged foods and avoid anything with salt on the assumption that it is iodized salt. For further information on what to eat and what to avoid on the low iodine diet, see the FAQ on the Thyrvors website.

www.thryvors.org/pdf/Thryvors_LIDFAQ.pdf



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fate whose destiny depended on answers beyond my control. I felt like I was being crushed

by the weight of an unwelcomed vocabulary: 2.5-centimeter mass, papillary, metastasis, ablation, thyroglobulin, TSH, and RAI. The pressure of my seemingly precarious situation continued to mount when the physicians told me that I would drink 200 millicuries of radioactive iodine to cook away the last remnants of malignant tissue.

But the moment the doctors told me that one of the possible side effects of the treatment was that I might lose my memory, my perspective changed from the innocent sparrow to the controlling young man. I wasn't angry in the sense that I wanted to crush something, nor was I wanting to lash out at authority, but I found myself trying to come to grips with a situation that seemed to be rapidly spinning out of control. The words "memory loss" struck me like the final blow of a stick to a twirling Mexican piñata that scattered not prizes, but a lifetime supply of Synthroid tablets.

Sometimes wisdom, competence and expertise come at the expense of loss. Losing my thyroid and temporarily losing my memory, in that lead-lined room at Duke University Medical Center, led me on a search for memory and learning. The discoveries were deceptively simple, not unlike words from ten fortune cookies:

1. Keep a diary for a few days and analyze what you remember best.
2. Associate any two things together.
3. Your visual memory is perfect, make use of it often.
4. Become emotionally tied to what you wish to remember.
5. Review periodically, not constantly.
6. Change your worry frequency to your memory frequency.
7. Learn to minimize stress in your life.

8. Get adequate sleep.
9. Pay attention.
- 10 Regularly exercise your body and mind.

Memory is a gateway to intelligence. I found that these keys helped to unlock its extraordinary power. Will you use them to unleash your mental skills? The answer is in your hands.

Scott Hagwood is the 4-Time United States Memory Champion and author of *Memory Power: You Can Develop a Great Memory – America's Grand Master Shows You How* (Simon & Schuster 2006). He will be in Vancouver on May 4 & 5, 2006 at the Granville Island Hotel.

Please visit www.jumpstartnow.org for details.

A Historical Note on Thyroid Disease And Its Surgical Treatment

Irving B. Rosen, MD, FRCS(C), FACS, Professor of Surgery, University of Toronto and member of Thry'vors' Medical Advisory Panel, has recently written an article outlining the historical development of thyroid surgery from the late 19th century to today.

In this fascinating report, Dr. Rosen outlines the development and understanding of surgery of the thyroid, starting with the first surgeries performed in Vienna in 1867. Because of the thyroid gland's easy access and proximity to the surface of the neck, it was a relatively easy organ to remove and thus has a long surgical history. Improvement in outcome increased fairly rapidly as the first surgeons lost 40% of their patients but by the early 1900s the rate had dropped to 5%. In fact, Theodore Kocher won a Nobel Prize in Medicine in 1909 for his surgical prowess with thyroidectomies, and was visited by American doctors who brought his techniques to the U.S.

To read Dr. Rosen's full article, including the advancements made by Canadian doctors, visit www.thryvors.org



LID Catering

Advertisement

For thyroid cancer patients the secret to successfully implementing the low iodine diet (LID) prior to radioactive iodine treatments or scans is advance planning. The preparation of meals and snacks can be a huge challenge – especially if you're hypo!

If you have young families and are trying to prepare meals for them, or if you're too busy to prepare LID meals for the two weeks prior to your scan or treatment let *Icing on the Cake Catering* prepare healthy and tasty meals, carefully based on the recipes found in the Norene Gilletz, "Low Iodine Diet Cookbook" with an introduction by Kenneth B. Ain, M.D., Professor of Medicine, Director, Thyroid Oncology Program, Markey Cancer Center, University of Kentucky, and Director, Thyroid Cancer Research Laboratory, Lexington, KY

From homemade breads, muffins and cakes to hearty soups, satisfying casseroles, and lively snacks we will work with you to develop menus to suit your tastes.

There is no doubt that this is a stressful time in the life of any thyroid cancer patient; take the worry out of meal preparation by calling Julie at 416-461-3046.

Julie is a caterer in the Greater Toronto Area who works one-on-one with clients to develop specialized menus for business and personal occasions. www.icingonthecake.ca

Recipe Box

Gazpacho a lovely cold soup for summer lunches.
by Tara Gallagher

chop finely:

1/2 bunch of celery 1 onion
1/2 green pepper (or more) 1 cucumber

add:

2 tbsp dill
3 tbsp mint
1 tbsp basil
1 tbsp oregano
3 tbsp marjoram
1 tbsp parsley
1 tbsp pepper
1 tbsp non-iodized salt
1/2 cup of fresh lemon juice
1/2 cup olive oil
8-12 large peeled tomatoes



if desired: 2-3 cloves of chopped garlic

Put everything into a large pot and blend with a hand-blender, blend moderately leaving some chunks.

If you don't have a hand blender, use a food-processor to loosely chop the ingredients.

New Recipes Added to the Thry'vors LID Recipe Index

Our Thry'vors index contains over 230 recipes. To view LID recipes, go to:
www.groups.yahoo.com/group/thryvors/files

Please post your favourite recipes to the listserv and they will be added to our index.

Please join us for

Canadian Thyroid Cancer Support Group
(Thry'vors) Inc.'s Fifth Annual General Meeting
Sunday May 28, 2006
1:30 pm, Mt. Sinai Hospital, Toronto
(agenda available upon request from Rita Banach, thryvors@sympatico.ca)

Also available, a doctors' conference at Mt. Sinai Hospital hosted by the Department of Otolaryngology "Management of Thyroid Nodular Disease and Cancer". May 26-28th. Contact Caroline Prato at 416-586-4800 ext. 3236 or cprato@mtsinai.on.ca for more information.

sun.	mon.	tue.
14		
21		
May 28		



Ask Thry'vors Q&A

with Dr. Rodin

Your Thyroid and Your Mental Health



Dr. Gary M. Rodin, MD, FRCP(C)

Head, Department of Psychosocial Oncology and Palliative Care
Princess Margaret Hospital, University Health Network Professor of
Psychiatry, University of Toronto

Q. What is the impact of thyroid cancer treatment on mental function?

A. Thyroid cancer treatment, including treatment with surgery and radioactive iodine, are associated with temporary hypothyroidism (underproduction of thyroid hormone) and subsequently the need for ongoing thyroid hormone replacement. A variety of mental symptoms may occur with hypothyroidism, which may occur if thyroid hormone is not adequately replaced. These include physical symptoms of weakness, fatigue, cold intolerance, weight gain, constipation, hair loss, hoarseness, stiffness and muscle aches. Mental symptoms of hypothyroidism include sleepiness, memory impairment and depression. The physical symptoms of hypothyroidism, such as the slowing of speech and physical movement may simulate depression, but hypothyroidism may also be a cause of clinical depression.

Q. What is the impact of thyroid hormone replacement on mental function?

A. Thyroid hormone replacement should eliminate the mental symptoms of hypothyroidism. If the dosage is insufficient, there may be persistent symptoms of hypothyroidism. Excessive thyroid hormone can result in anxiety and agitation, memory impairment, depression, sweating, fatigue, heat intolerance, weight loss, and muscle weakness.

Q. What is depression?

A. The term depression refers to a spectrum which includes normal sadness at one end of the spectrum and a psychiatric illness at the other. Feelings of sadness are common after the diagnosis of cancer, even when associated with a favourable prognosis, which is the case with most thyroid cancers. Depressive symptoms which are severe,

Could You Imagine by Christine Diaferia

Could you imagine a world with no pain
Smiles on every face, dancing in the rain
Could you imagine both you and me
Imagine a world cancer free.

Could you imagine no more suffering?
Think of all the joy that would bring
Could you imagine we would win the race
Imagine a cancer free place.

The battle would be won,
A new journey begun
Let's fight for the cure
For cancer no more
No matter what the cost
No more lives lost.

Let's raise our hands up
And never give up
Let's shout out with joy
Fight for each girl & boy
For every mother & father,
sister & brother
Let's fight together, for each other.

**Send us your poems.
Email thryvors@sympatico.ca**



persistent and associated with physical symptoms such as sleep disturbance, loss of appetite or weight, loss of sexual interest and with loss of interest in usual activities may reflect the presence of a psychiatric disorder

Q. How do you know when you need professional help? Where do you find professional help?

A. When the symptoms described are severe and persistent (e.g. every day, most of the day for more than two weeks) professional help may be needed. There is particular urgency when these symptoms are associated with suicidality. Your family doctor or the center where you received your cancer treatment may be able to help with a referral. Community health agencies may also be able to assist with a referral.

Q. What variables do doctors consider in their decision to prescribe anti-depressant medications to hypothyroid patients?

A. Factors which suggest that antidepressant medication may be of help include persistent or severe symptoms of depression, physical symptoms such as loss of weight or appetite, physical slowing, loss of libido and sleep disturbance. Also, patients with a past history of a successful response to antidepressant treatment for depression may be more likely to respond again.

www.thryvors.org

Thry'vors needs your help to make others aware of our support group. If you are willing to tell your doctor, clinic, cancer treatment centre, pharmacy, public library, employee services department, or any other organization about Thry'vors, please e-mail us at thryvors@sympatico.ca and we will send you samples of our brochure, patient booklet and an order sheet to bring to your doctor/facility. Our members are our very best promoters!

Offering information and support



Upcoming Events

Public Education Meeting

Kitchener-Waterloo Chapter of the Thyroid Foundation of Canada

DATE: Wednesday, April 26, 2006 - 6:30 business, 7:00 speaker

LOCATION: Kitchener Public Library, lower level, 85 Queen Street North, Kitchener

SPEAKER: Dr. Wendy Rosenthal, Endocrinologist, Assistant Professor of Medicine, Internal Medicine, Endocrinology and Metabolism, Trillium Health Centre, Mississauga

TOPIC: "Thyroid Nodules - When Does Your Doctor Worry?"

For information call: 519-884-6423. All questions welcome.

Educational information available before meetings.

Social time and refreshments.

Public Education Meeting

Kingston Area Chapter of the Thyroid Foundation of Canada

DATE: Tuesday 16 May 2006 - 7:30 pm

LOCATION: Ongwanada Resource Centre, 191 Portsmouth Avenue, Kingston.

SPEAKER: Dr. Irving Rosen, Thyroid Surgeon, Mount Sinai Hospital, Toronto

TOPIC: Surgery - When and why needed? What to expect. Side effects, etc.

Raffle draw will take place. Ample parking. Free thyroid literature. Question period following lecture.

For information call: 613-545-2327

Public Education Meeting

London Area Chapter of the Thyroid Foundation of Canada

DATE: : Tuesday, May 23, 2006, 7:30 - 9:00 p.m.

LOCATION: Central London Public Library in the Stevenson & Hunt Room, 251 Dundas St, London, Ontario.

SPEAKER: Dr. Terri Paul, Endocrinologist, St. Joseph's Health Centre

TOPIC: Osteoporosis & Thyroid



Upcoming Events - Continued

The Da Vinci Gala - A Celebration of Thyroid Cancer Treatment and Research.

In support of the Joseph and Mildred Sonshine and Family Centre for Head and Neck Diseases at Mount Sinai Hospital.

DATE: Wednesday, June 21, 2006 at 6 p.m.

LOCATION: The Venetian, 219 Romina Dr., Concord, ON

For more info please call Eryn Miller at 416-586-8203.

<http://www.davincigala.com/>

The 9th International Thyroid Cancer Survivors' Conference.

Sponsored by ThyCa: Thyroid Cancer Survivors' Association, Inc.

DATE: Friday-Sunday, October 27, 28, and 29, 2006.

LOCATION: At the Sheraton World, 10100 International Drive, Orlando, Florida 32821.

The Conference features more than 80 sessions: The latest research, advances in treatment and follow-up, insurance and employment issues, and coping skills for well-being. The more than 50 speakers will include leading physicians and other specialists. The hotel has arranged special room rates for conference attendees for single, double, triple, or quad rooms. Details will continue to be added to the ThyCa web site at www.thyca.org.

ThyCa's 5th Annual Dinner/Auction to Support Research.

DATE: Saturday, October 28, 2006 from 6 p.m. to 10 p.m.

LOCATION: At the Sheraton World, 10100 International Drive, Orlando, Florida 32821.

Sponsored by ThyCa: Thyroid Cancer Survivors' Association, Inc. and held in conjunction with the 9th International Thyroid Cancer Survivors' Conference. Details will continue to be added to the ThyCa web site.

Public Education Meeting

London Area Chapter of the Thyroid Foundation of Canada

DATE: November 21, 2006, 7:30 - 9:00 p.m.

LOCATION: Central London Public Library (address below)

SPEAKER: Dr. Merrill Edmonds, Endocrinologist & Chapter Medical Advisor, St. Joseph's Health Centre

TOPIC: Hypothyroidism

All Public Education Meetings are held at the Central London Public Library in the Stevenson & Hunt Room, 251 Dundas St.

ALL WELCOME! OPEN TO THE PUBLIC! FREE

ADMISSION! For more information call: 519-649-5478

Informal Thyroid Discussion

Kingston Area Chapter of the Thyroid Foundation of Canada

DATE: 4th Sunday of each month, 3-4 pm - March 26, April 23, May 28, June 25

LOCATION: Loblaws Upstairs Kingston Centre, 1100 Princess St.

TOPIC: Discussion led by Loblaws' Drugstore Pharmacist Bozica Popovic, B.Sc.Pharm. and representatives from Kingston Chapter. Bring your questions. Thyroid literature is available. Free, no reservations needed. For information call: 613-530-3414 or 613-545-2327

Tell us what you think

As you can see, we've re-designed the newsletter. Let us know what you think by emailing us at thyrvors@sympatico.ca

Your comments and suggestions are welcome.

Editors: Andrea Peca, and Tara Gallagher

Graphic Design and images provided by
(ursula@litmusdesign.ca)

litmus DESIGN

Image source: iStockphoto

Like you, we have been touched by thyroid cancer. We are a non-profit organization and we are all volunteers. If you would like to donate or to become a volunteer please visit Thyrvors.org.

Donation cheques can be made payable to: Canadian Thyroid Cancer Support Group (Thyrvors) Inc.

Mail to: Canadian Thyroid Cancer Support Group (Thyrvors) Inc.

PO Box 23007, 550 Eglinton Ave. West
Toronto, ON M5N 3A8