

NEVER GIVE UP

A book to help cancer patients and their families.

- Fears, doubts and questions.
- Answers from psychologists.
- The stories of those who have survived...
- And an invitation from the mountaineer Marco Confortola to never give up. Because yes, you can win!

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Introduction

We start with an observation, unfortunately hard to deny: that despite the advances in medicine, the word "cancer" still arouses fear, anxiety, doubt, in short ugly thoughts. No getting around it: When you hear people say "I'm sorry, she has cancer", your mind, your eyes, your lips, your hands, your whole being shall from now on worry, tense up, feel anger, and your thoughts end almost immediately where you do not want them to go to the thought of death!

For many it is not just a diagnosis: it is a judgment. This is so true, as in everyday life we tend not to think of the suffering, but believe that certain things can only happen to others, but not to us. And even those close to a person suffering from a tumor discover overnight that they are confused, have the feeling that the world is falling apart and feel lost. The uncertainty and fear sometimes gets the better of you.

The word "cancer" has long been almost unspeakable, replaced often with "incurable disease", to indicate a disease that does not give you a choice, or is "very bad", as if evil could be "good".

Yet medical science in recent years has made incredible progress. It is now a fact that there are less people dying of cancer, thanks to innovative therapies and massive prevention campaigns and information, which more and more heal the sick completely.

Take for example breast cancer, the incidence in the female population is 10%, a high figure; but of the women who get sick, almost 90% are cured. In short, life expectancy, even for those dealing with the disease every day is increasing. Despite this, cancer continues to be perceived as one of the worst diseases. Well yes basically it still is, since it is the second leading cause of death (30% of all deaths) after cardiovascular diseases. But you can face it, and it must be addressed in a positive manner. Because, facing it loud and clear, you can be healed. Really! In Italy today six out of ten patients survive and there are about two million and 250 thousand people, who have had a diagnosis of cancer, undergo checks less and less frequently and are back to everyday life, having returned to work, playing sports and having children. And then there are all those patients who, thanks to the development of science and technology and new therapies, can live with the disease for years with an acceptable quality of life and dignity.

But how do you deal with this disease? This is a difficult question to answer.

However, if it is true that there is no manual that tells you how to fight cancer, the following pages are to help to the sick to face their suffering, with the aim of providing answers to the many questions that arise when you discover that you have cancer; We also want to support relatives and friends and offer suggestions on how to assist their loved ones who suffer; and, above all, we want to convey a **message of hope**. This is not an easy goal but we hope that, once you read the book, it may help you.

Flavio Ferrari
CEO
Cancer First Aid

"Never give up" the words of Marco Confortola

The climber Valtellina looked death in the face on K2 where he lost his toes. But he got up and triumphed. It sounds like the story of a cancer patient who has survived...

We start this book by passing the floor over to Marco Confortola, one of the best known mountaineers. Just over a year ago he climbed his eighth eight thousand foot mountain, Lhotse (the third highest mountain in the world); and in 2012 he was up on top of the Manaslu (8,163 m), in the Himalayas. He did not have toes, they had been amputated in 2008, after he had frozen on K2, a peak that cost him dearly and which indeed, has seen him face death.

He succeeded after two failed attempts to scale the Lhotse (8,516 meters) in 2010, when he was forced to give up at 7,991 metres because of his frozen feet, and the Dhaulagiri (8,167 metres) a few months before.

That's why we start with him and his tenacity - cancer patients need the same perseverance to fight the evil that has hit them.

They too often find themselves faced with disappointment, the failures and the relapses. Perhaps the example of Confortola can help? One should never give up, because your summit - healing – can be attained. And you can get to the top with sacrifices and struggles of everyday life, the conquest, small step after small step, meter after meter, good health or the peak of the mountain.

"The important thing is to believe - stresses Confortola - and be always positive. If you're not convinced you can do it, if you're not convinced of being able to get to the top or to be cured, it's over before you began. If you find yourself in a hospital bed where they told you had cancer and decide not to fight, it is clear that death will win. I too, after the disappointments of Lhotse and Dhaulagiri, I would never have climbed to the top of Manaslu if I had not believed in myself"

When was your first real contact with cancer?

"When my maternal grandmother Adelina (who was less than 60 years old) became sick, and subsequently, died of pancreatic cancer. My grandfather died of cancer in his early fifties, but I do not remember much about him since I was young. My grandmother, however, of whom I have vivid memories, as I was attending middle school when it happened. When I heard, I raced from my house on my bicycle as she lived in Aquilone in Valdisotto. Since then, unfortunately, I have encountered cancer too many times.

A little over two years ago it happened to my friend, Danilo. I had met him a few years before, almost by accident. He had come to my house to do some work, and I found out he was a fan of mine and followed my career. We became friends and he also sold me his car. Shortly before leaving for the climb to Manaslu, I received a message from his daughter's phone. "Danilo is gone." Cancer has taken him away. And four years earlier had killed his wife. That terrible!

But?

"But the outcome of this disease is not always death. After the conquest of K2, with frozen toes which were amputated, I was admitted to the surgical ward of the Padua tumour hospital. And it was there that I realized how patients and mountaineers share a dream. Both are to be found in extreme difficult conditions, on the brink of death.

Both are supported by the same desire, the same conviction: they want to share, they want to get back on their feet and reach the goal, which is the either healing or the summit of a mountain. It is not easy, I know, sometimes it may even seem impossible; mountaineering or being ill but one has to persevere and it all becomes feasible. "

What did you learn in Padua?

"At that time I remember feeling a burning anger! Yet I was the one who was better: many of the patients have not come out with their legs. Every morning I passed and greeted them, I tried to make them smile, because I knew of their problems: in short, I tried to make them pass the time as best they could.

I entertained them all with my jokes, my stories such as gymkhanas with my wheelchair. I had created good relationships with the doctors. . Sure, some sometimes I found myself with people, even young people, devastated by evil, aware that they would not be going home.

But very often I met patients who would have died if they had resigned themselves even before trying to heal. Instead, in their eyes there was a special light; and in their gestures, along with anger and pain, I also saw such determination, the desire to not miss a moment of life and fighting in every way to get out of hospital.

When I meet with Dr. Joseph Valmadre, an oncologist friend who works at the hospital in Sondalo, he often reminds me how important it is for a sick person to believe. And that is what I try to convey to those I meet. "

Well, what do you have to say to the sick?

"Actually ... When my toes were amputated, Dr. Gianfranco Picchi, with whom I was now very close, had said: "Look, most likely you will not be able to run." I will I replied: "Confortola will easily run again." And with hard work, with suffering, I went back to doing what I did before: skiing, climbing and, of course, running. What would have happened if I had stopped and pitied myself and felt sorry for myself? I know very well that it's hard, I have tried it. And not just in the hospital room.

What do you mean?

"I do not know how many times I have been found close to death. Like the night after conquering the summit of K2. The limits of the serac, (a block or column of glacial ice, often formed by intersecting crevasses on a glacier. Commonly house-sized or larger, they are dangerous to mountaineers since they may topple with little warning) a little below the summit, I and another climber had dug two holes for our backsides and feet: no tent, no sleeping bag. We faced a camp at 8,400 meters! Sometimes we would get up to jump around, we kept moving our fingers and toes, and we massaged each other. I clung to the idea that I would make it, I would be saved: I wanted to go home with all my strength. It was my determination to escape death.

For cancer patients it is probably harder than it was for me; but they must believe they can do it. Today there are really many who are saved. I know that may not be enough because this disease is an evil bastard and you cannot give it a chance. One should never give up, never give in. If that night below the summit of K2 I had fallen asleep and I had not believed, definitely I would not have woken up again.

You, however, are prepared for these things

"It is true, but those who get sick must also train themselves. When you are subjected to a cycle of chemotherapy, maybe a second, and a third, it is important not to cry but, to the greatest extent possible, behave as always, doing what you always have done. Certainly it helps to find the positive, the serenity that allows you to tackle the disease in the right way.

Can you say something to the sick who are experiencing pain?

More than an experience, I dare say. No one can imagine what I felt when I woke up after surgery for amputation: a throbbing pain, from the toes that I no longer had.

I guarantee that for several days it was a real torture: I did not know where to put myself. Lying down or in my wheelchair it was the same thing. Some nights, even several weeks after amputation, even rubbing sheets hurt and I was forced to put my feet in a kind of protective cage. I had to learn, day after day, to live with the pain that even today, on many occasions, has not left me. You have no idea of the pain that I had walking on the way up to Manaslu: But I held firm and I did it.

And then the pain of death: how many friends I lost in the mountains. A few days before mounting up on the summit of Manaslu, an avalanche has taken away eleven of my companions. I believe that as a cancer patient you are in same condition: you must put in mind that you will need to heal.

The healing, as a goal, is not a gift: you need to conquer it. And I want to say another thing even to those who are not sick"

Go ahead

"When you are well you do not realize what you have and you complain about maybe a little pain, labour, fatigue. We do not understand how lucky we are when we are healthy. A bedridden patient knows, even when unable to walk, how the world changes. When I ditched the wheelchair it changed the world for me."

Besides apart from your determination, what helped you in the most difficult times?

"First of all the people who love me ,starting with my dearest to whom I have always been close and with whom I have argued many times, even when there would be some reason to regard me as a little eccentric. And with my many friends I mean the real ones, not fair weather friends who had vested interests, and disappeared as soon as they found I was in trouble.

I think , for example , my friend Roberto Baitieri , said "Pelanda" , a retired driver when I needed it , gave me all his availability,: Before amputation he took me in his car from Valfurva to Bergamo , waited a couple of hours that I did my sitting in a hyperbaric chamber , and then I brought home . Every day, never complaining."

And then?

Of great help were my projects, thoughts of my house, to my climbing, my descending mountains, and my books. I think when a person is in hospital and time passes so slowly, one thinks of what one can do once released, it was definitely a comfort, a help, and one more incentive to not give up. When I go out from here what should I do? And this is the question that must be asked: it is important to think about this.

The dreams and goals to reach help greatly because you have to be convinced that there is still a future to fill. After the amputation of my toes, as I said, I often had very sore feet which would wake me at night.

But you know that I said? This is the misfortune that happened to me, I realize what I have and I can still do. In short I have been close to death on several occasions, but I'm still alive and I have a future to build. This applies to all and even cancer patients should never forget this.

And what about the future, many times I have heard you speak of the young...

..... who are the future of the world? Often I am asked to speak in schools. The first thing I say is that K2 treated me like a gentleman, because it left me with life. What I try to teach is precisely to appreciate this gift of life, the most important that they have; and they must not waste their lives. And I also speak of cancer because they should realize how lucky they are, that they are okay. Thanks to the historic achievements I have achieved, you can see that I have listened and then try to instill in them my values, my "commandments": obey, study and play sports. I also had this printed on t-shirts.

Fear is another emotion that I think unites the experience of the sick with cancer and that of a climber. How to overcome it, how to go ahead anyway?

Fear is a fundamental feeling. Especially when you find yourself in certain passages in the mountains, where if you make mistakes you will not need a doctor but a florist! The young people with whom I come into contact in my meetings in schools often ask if I'm scared. I say that maybe it's a different fear from them, but I also have fear. If you are afraid you are careful not to make mistakes: if you do you will find yourself unconscious. Risks can kill you. The example I give is of a small child beginning to crawl: who arrives at the limit of his capability, becomes unsure then returns to safety. It is this fear that saves lives. When you say you have a malignant tumour do not be afraid. That night on K2 I did not know if I would return home. I got scared and I said to myself: here I shall rest. But I learned to bring out my warrior spirit: I kept my head down and did not give up. In this way I knew I would see my beloved mountains again

Because a cancer patient should never give up, as you often say? You also know that the moments of despair are many. And, in truth you find yourself overwhelmed by the disease.

When you're in pain and suffering, facing death ... something changes when you're in that situation. No, I don't think so. The important thing is to understand how to get out, how to overcome those moments, those difficulties. And if someone can lend a hand, whoever it is, so be it. Here, I hope that my story and my contribution can have this role: and be used to help a patient to recover hope, to have one more reason to fight, to fight cancer. To never give up!

The importance of psychological intervention.

Questions from the sick and their families

Why Me? What have I done wrong? And what if I don't make it? Can I be as I was before? These are the questions asked by those diagnosed with cancer. Is it better to answer these questions or not? We do not have the courage to talk to him, and are in a quandary: what can we do? What topics to deal with? How can I help him? These are the concerns of family members. Answers and suggestions.

Getting cancer is not just a matter of physical health. A diagnosis of cancer can be experienced as a real drama involving all aspects of a person, from the existential psychological sphere, from relationships with others to the religious and spiritual. Because the subjective experience of cancer and its interpretation by each individual is a menacing and uncontrollable process that invades, and could lead to death. Cancer, regardless of cultural contexts, is considered the most feared disease. Few other diseases have such an impact with outcomes so obvious.

The effects of the disease can be devastating: fear and anger are immediate, but then follows almost immediately uncertainty, anguish and helplessness. In fact, it is a trauma that threatens to upset the entire life of the patient, to affect their social life, relationships with people, to increase the number of days of hospitalization and even to interfere negatively with the ability to cope with cancer, because it is obvious that cancer causes profound changes of life it is vital that we know how to cope with it.

So the problem must be identified and addressed immediately. Because sometimes it happens that the psychological suffering is ignored on the part of those who learn they have cancer; instead the physical suffering is addressed and taken care of. Not for nothing, the National Cancer Plan 2010-2012 states that "activation - in the different stages of cancer and disease should attend to psycho-oncology prevention, treatment and rehabilitation of emotional distress, whether they support or more specifically psychotherapeutic (individual, group, couple, family) - is fundamental to the patient and his family." Not to mention that a greater awareness of what you are experiencing can help you to cope better with the disease. Because if it is true that cancer is not born for psychological reasons, it is not, in short, a psychosomatic illness, it is equally true that the role of psychology can be crucial to the healing process.

One who is conscious of the continuing struggle copes better with therapy; they can speak with doctors of the problems so that they can personalize care to follow so that it is more effective. The sick and their families must, therefore, believe that if you can (and you must) take care of the psychological aspects; to control and limit stress related to the illness and medical treatments, it is possible; that to face the future, with its inevitable uncertainty, and still give a meaning to their existence is necessary; and that will improve the quality of life.

To avoid falling into despair it is important to find help, someone who can give answers to the many huge questions that require answers. And not only the sick, but also the family and the people that are close. So do not be afraid to ask.

The people treating you will certainly respond to your questions and give you the information that will be useful to overcome moments of difficulty and fear and deal clearly with any decisions you need to make.

This also applies to family members who may accompany the patient, if he wishes, to various medical examinations: Prepare well for the meeting, ask questions and if you do not understand something, ask.

Unfortunately, however, it is not always possible to have health staff, better a psychologist, available to help. Who can listen, who is able to give the right answers; and often you do not even want, or dare, to talk about it. This is why we thought it was appropriate to ask, some psychologists who daily face these situations in departments of oncology and radiotherapy in hospitals or in the rooms of hospice, what are the questions that the patients and their family members pose and the answers to give...

It's clear that to customize the interventions is practically impossible, because each situation should be evaluated on its own. However, we presume to hope that these responses may allow those who will read them to reduce anxiety and the concern and find some serenity. In short, we hope to give you a hand!

Cancer patients' questions

What will happen to me? How will it change my life? Will I be able to deal with a disease of this kind?

These are certainly some of the first questions that arise from those who discover they have cancer. Immediately a doctor announces the presence of the disease, you may wonder what will happen and how you will react. Some people are fatalistic and believe that destiny has reserved this fate for them and it is useless to try to change it.

This is not the best way to deal with cancer. This attitude does not help those who become overwhelmed by anxiety: they focus on every symptom, any changes in the body are regarded as a sign that the disease is worsening, although these changes may have nothing to do with cancer. Worse still is the way that you react, immediately despairing and thinking of death, convinced that there is no more hope. The consequence of this is that you neglect work and lose interest in life.

Those who think positively usually succeed more easily in finding answers to these questions. There is, in fact, a saying that every man is only given the cross that he is able to bear, and has the capacity to deal with.

In any case, the more constructive approach instills a fighting spirit in those suffering from cancer: they have the knowledge that, although it will be a difficult in which there will be moments of despair and bewilderment, at the same time there is a belief that this is a battle for which it is truly worth fighting – a fight for one's life.

Why me? What have I done wrong?

It is very likely that this is another of the main questions that arise from anyone who has been diagnosed with cancer. These are automatic questions which everyone, the sick and their families, ask. The same question as those hit by a disaster or a death pose; and life becomes very difficult, it makes you anxious because you cannot control it. The anger with what is happening is enormous; you think about hospitals, the treatment you will have to follow, the things you will miss – why me? There are those who think deeply on this question and look to their own lives for a reason, mostly in a negative way. What have I done wrong to deserve this? But why should you have done anything wrong? It is useless to continuously ask why or think that you are partly responsible for this situation. Cancer is a complex disease and the causes of it are still obscure, it is never due to a single cause.

Although it will seem strange, but in the face of this question I ask you to remember the 'Night Song of a Wandering Shepherd of Asia', and extraordinary poem by Giacomo Leopardi that asks questions about the meaning of life and was second to none. In the poem, the shepherd turns to the moon with these words:

"Why are you there, Moon, in the sky? Tell me why you are there, silent Moon. You rise at night, and go contemplating deserts: then you set. Are you not sated yet with riding eternal roads? Are you not weary, still wishing to gaze at these valleys? It mirrors your life, the life of a shepherd. He rises at dawn: he drives his flock over the fields, see the flocks, the streams, the grass: tired at evening he rests, expecting nothing more. Tell me, O Moon what life is worth to a shepherd, or your life to you? Tell me: where does my brief wandering lead, or your immortal course?"

These questions are not very different from those to which you are trying to find an answer. Answer the question "Why me?" It is as if you are trying to explain the meaning of life. And in front of a doctor who tells you that you have cancer, there is a real sense of loss.

So, our life does not always according to plan and those who think it should will only be continually disappointed. It is by no means automatic, that since you have led a healthy life, have never smoked and have participated in sport and done nothing to excess in your life that you should never be ill. Such a way of life, whilst commendable and certainly appropriate, does not exempt one from the possibility of getting cancer.

Referring to “The Death of Ivan Ilyich”, one of the most popular works of Leo Tolstoy, in which the protagonist discovers that he is sick. “During the illness” – writes Tolstoy, referring to Ival Ilyich – who formed the idea that, if he had lived a righteous life, suffering and death would have made sense. But he had always lived honestly, and could not understand. In short, even he was lost, and considered it unthinkable that he may be sick; and asks: “Why me?”

Anastacia Lynn Newkirk, a famous American singer, told the Chiara Maffioletti (a journalist with Corriere della Sera – an Italian daily newspaper) in an interview in September 2014, that she had breast cancer twice and has recovered. She said *“I never asked why me? I always knew that whilst I was in that situation, I had the opportunity to help many people”*

Anastacia has never tried to hide the fact that she had the disease and even today, talking about it does not bother her. *“It’s interesting that they started to call me a ‘fighter’. In fact for me it was just a case of carrying on despite enduring difficult times. Sometimes these things are so strange, so different, that this is the only way to overcome them. I simply do not know any other way”*. For this reason, when you talk of ‘the fight’, the singer does it in a positive manner. It means continuing to think that despite the cancer, maybe, perhaps there is a risk of death, but if you can overcome this disease you can learn something. Because one learns from everything, even negative things. *“Meditation or reflection helps to make you optimistic. My way of making sense of life is to try to turn the negative into a positive. And my biggest goal? What can I say? It is not always easy, especially at the beginning. When you discover you are sick, you want to cry and I think it is right to indulge in this most natural emotion. But it is not right to stay in this frame of mind. You have to believe that at the end one can gain something good and it is essential that one moves forward”*. Anastacia, is a woman who has been proven to have great courage, but she could not answer the question “why me?”

There is a letter which the writer/comedian/singer Giorgio Faletti (who died in July 2014 from cancer) sent a month before his death to his friends. In this letter he says *“In life there are things that you and others are searching for and other things that happen to you. Do not regret the choices you have made. At this point there are two solutions. You try to escape and leave them behind or you stop and face them. Whatever solution you choose changes you, you have only the choice of either good or evil.”*

But are we sure? Can I get a second opinion?

A second medical consultation, in fact, may be useful and in many cases is also advised; the important thing, however, is to be aware of what is happening. One should not avoid facing reality and believe that you can escape the inevitable anguish that the disease brings. Indeed a rebuffing attitude can be an obstacle in treating the disease.

Since I found out I had cancer, I have become increasingly anxious and depressed. Can this can worsen my illness or limit the effect of my treatment?

Who does not go through moments of anguish when he discovers he has cancer? And it is natural that this state of mind increases with time. But if there is no evidence to show a connection between anxiety and the development of the disease, is it equally true that a lack of determination or that various forms apathy may affect the results of cancer treatments, (chemotherapy or radiotherapy). It is important that the patient participates fully in the course of treatments. A British study examined 9,417 patients, and showed that in patients with symptoms of depression, the mortality rate was higher - up to 39%. But this is always the case in that a depression affects the quality of life of each of us even more so of a sick person.

I feel weak and sluggish, listless and discouraged, I have trouble concentrating, I have little appetite and I find it hard to sleep; In short I feel really down.

These feelings are increasingly common among cancer patients although not all suffer in the same way. And what doctors define as "fatigue" consists precisely of exhaustion, lack of energy to the point of not being able to perform normal daily activities. It is clear that a cancer patient who undergoes surgery will feel tired. This fatigue and weakness happens often after chemotherapy or radiotherapy. This is accentuated if the treatment causes nausea and vomiting, and, hence, a reduction in appetite. A situation of this kind clearly affects relationships with family and friends because it makes you impatient and you push them away. The "fatigue" signals a sharp deterioration in the quality of life.

In a situation of this kind you can, and must, find different ways of dealing with it. First you must talk to your doctor, without hiding anything. If the problem is mainly medical he may recommend iron supplements or vitamins or recommend the use of food supplements. If, instead, the "fatigue" is of a psychological nature it is appropriate for the patient to talk to a psychologist to help him through reviewing how to quantify and evaluate, how to reduce noise, how to manage your sleep, diet and exercise; any general advice he can give you will be useful. For example, to combat poor appetite, you should eat little but often, maybe choosing your favorite foods. It can be very useful to compile daily a list of things to do, distributing them evenly over several days, modifying them to your strengths. A physical activity is certainly good and necessary because immobility could make you feel worse: a walk helps fight nausea or vomiting, and can even improve sleep or your state of mind. There are those who recommend relaxation exercises. If you are very tense you can find a corner in the house, perhaps with a chair or a couch, where you can be comfortable, listening to music and doing soothing breathing exercises.

It important that you recognise that life has changed: the pace and commitments you had previously are going to have to be modified because you are no longer able to keep up and you should, therefore, seek a new balance. But it is equally important, even with this different situation and with frequent moments of rest, you do not do anything which can increase the risk of depressive symptoms and negative thoughts.

Peoples questions bother me.

Whilst they are interested, questions from other people can feel intrusive and inappropriate; patients can struggle to answer the simple question "How are you? In fact, even in cases of recovery, there is always the fear that something may recur. Moreover, the questions posed by people you meet on the street sometimes bring to mind what happened even when you were not thinking about it. It useful to underline how the fear of becoming ill

again does not mean that you will become ill. If doctors have confirmed your recovery is going well you need to believe them and be convinced of this and can therefore respond calmly to the question "How are you?" referring to your current state and not the past. If, however, peoples' questions bother you, you can respond vaguely and then shift the focus of the discussion onto other subjects that have nothing to do with the disease.

I have been told that it will be very painful.

Pointless to hide it, this disease can be painful. Although, one should say as a premise, that not all feel pain in the same way, because it is a subjective experience; and there are those who are able to withstand more than others. Not for nothing that the World Health Organization Health emphasizes that pain must be understood as an experience: and psychological characteristics can increase or cause pain. Do not bandage your head before it has been broken. Even pain can, however, be addressed: by improving knowledge of the development of the disease and palliative care can reduce the intractable pain.

Can I use painkillers?

This is clearly a question to ask your doctor however, why suffer if there is a way to avoid or at least to ease the pain? This rhetorical question is at the foundation of the "philosophy" of care that you have, in dealing with cancer. There is unfortunately a false opinion, still quite widespread, that says that you should only take painkillers when the pain becomes unbearable.

Remember that the perception of pain is a subjective experience and it varies from person to person, it is better, however, resort to painkillers as soon as you feel the first symptoms: you will suffer less and the quality of life will be greatly improved.

And will I survive?

It's true, there is the possibility that this disease leads to death. But you must not be unnecessarily pessimistic! One should not forget that more and more people survive. And many others survive for long periods and with a good quality of life. Suffice it to say that, according to the most recent estimates, in Italy there are about two million and 250 thousand people who have experienced cancer and are increasingly close to the day of complete recovery.

I lost all my hair because of chemotherapy. Will my husband still love me?

With this question we introduce the complex issue of sexuality and marital problems when one of the two partners is sick, because it is obvious that cancer impinges on the most intimate sphere of a relationship. It is, in fact, normal to lose interest in sexual activity soon after diagnosis and during treatment, because ones focus is on overcoming the disease.

However, the changes caused by cancer can be both physical and psychological or, more often, a combination of both. It should, first of all, be said that the transformation can be different depending on the type of treatment to which the patient is subjected; for example erectile dysfunction in men who undergo surgery for cancer of the prostate, bladder and rectum. In women, on the other hand, chemotherapy may induce the menopause and depending on the age at which you submit to treatment, can be temporary or irrevocable.

Moreover, in cases of breast cancer, hormonal therapies (which can last 5 years, even for women who do not have to undergo chemotherapy), can induce the menopause which is

often irreversible. Women think that changes in their body especially related to surgical procedures, hair loss or alteration of weight makes them less attractive and confident, which in turn can lower their self-esteem, sexual feelings and alter the balance of married life. Not to mention generalized fatigue, the sense of inadequacy, loss of self-esteem, anxiety and fear. In short, there are many elements that can act negatively on sexual behavior. What to do then? Much depends on how close the pair were before the onset of the disease: if in harmony, both emotional and sexual, was very strong, it is definitely easier to recover intimacy which can sometimes be regained by listening and responding to these new needs, perhaps discovering a feeling which has been made even stronger from facing together the strain of the disease.

It is also evident that should a couple already be experiencing problems, the disease will only accentuate these. One should also note that a rewarding sexual relationship is not simply related to the physical, but also depends on the acceptance of body image and ability; the partner should not consider the outcome of the intervention as an obstacle. It is clear that a more tender approach can help regain the confidence that has been lacking, it is also important to reassure your partner that any physical changes are of little importance. In any case, talking is essential in understanding what sexual changes have taken place. And, please, forget those silly beliefs that sexual activity can spread cancer.

But I'm not as beautiful...

Women with the disease look in the mirror and do not recognize themselves, it is a real trauma: they see ugly, fat or thin, and then when they start to loose hair.... It is useless to try and hide the fact that treatments to fight cancer certainly leave their mark. Certainly, at the beginning the first concern is how to deal with the disease, but after that the theme of beauty becomes a major component for the well-being of every woman. Improving their appearance is sure to help them cope with cancer, starting from the use of a wig. But not only that, cosmetics applied well are useful, from foundation to blush, powders to moisturizing. The objective of looking beautiful becomes a priority.

Today many hospitals offer courses on make up for the sick showing them how to hide the signs of cancer treatments. Do not miss them, not only to learn about makeup but also to exchange a chat with those also undergoing treatment. However, there is no right or wrong way to deal with the situation. There's a way of behaving that can make you feel good and makes everyday life easier and there is also a way of behaving that can limit your life. It's better to choose the first way. If a woman decides not to wear a wig, she should still be able to maintain her daily life, go out and "tolerate the opinions" of others and their questions even though they can be embarrassing and annoying.

Will I be the same as I was before?

We should immediately clear the air of any false illusions: it will never be the same as before neither for you or your family. But this statement applies not only to the disease but for all events, pleasant and less pleasant, which run through our lives. It is true that you can recover from cancer, but your life expectancy will always remain slightly lower than those who have not had the disease. So, as sure as cancer, even for those who recover completely is not a walk in the park, cancer can have an indelible effect. It is impossible to forget the trauma, the pain, the suffering, the interviews with doctors, examinations, therapies etc etc. This does not mean that we cannot be happy and fulfilled, content to live and do whatever we wish. And maybe feel even better than before. How? For example, "exploiting" the most out of this situation, accepting it for what it is, suffering included it is hard, sure, but it could be of great help for personal growth. Life will appear under a whole new light if you grasp nuances that you did not notice before. The point is that there are

those who "thanked" the disease for shaking them up and appreciated better their existence, completely reviewing their way of life. Perhaps Nietzsche was right when he writes: "What does not kill me, strengthens me."

In this regard, it is significant what Alessandro, one of our young stars of "I ... after. I am a teenager and my life with cancer, "a collection of stories autobiographical stories written by young patients put together by Lorenzo Spaggiari, the surgical oncologist who has cured them.: says "In the last fifteen years of disease I have suffered the pain, it is true, and it is true that I suffered, but I was also in London every year I restored four Vespas, built two guitars". I went up to the Pordoi on a Vespa, burning all thirty-three bends whilst tourists looked on astonished. Also on Vespa, I went to the island of Elba and encountered a flood, I laughed and screamed. It is not over yet it's not over! Happiness is not the end of the road, happiness is the way."

What do I say to my children? And how do I tell them?

When a father or mother is sick what do you do? Instinctively every parent takes a defensive attitude, a desire to protect, especially younger children. Fear prevails that news of this kind can be traumatic and you do not want them to suffer or you think that the small child is not able to understand the situation. And so it happens often that children even the older ones, are kept in the dark. But do you really think that the small ones do not notice anything? You should realize that your life changes completely, that the sick father or mother cannot be the same as when they were healthy: also changes can be significant. The atmosphere at home obviously will not be the same: even if you try to avoid it, it is very likely that tension in the family will be felt. And when the child becomes aware of what is happening what effect could that have? Not knowing what's going on at home, would, however, allow him to think the worst, not only for dad and mom, but also for himself. He would feel excluded and abandoned and, sometimes, even responsible for what is happening. It is not unusual for children to show behavioral problems at school, feeding disorders and difficulty sleeping. Some worsen their relationship issues, manifesting even aggressive attitudes. One should find the most suitable way to inform them, with clarity and simplicity, reassuring them as well. This will surely encourage an easing of tension. The child is helped to understand: perhaps the information can be gradual, tied to times of illness, treatment and the consequences that these cause. He too, will be able to show his feelings, his fears, anxieties that are not very different from those of other family members involved. The child must always have a communication channel open. If this is not done, sooner or later you can be sure that he'll ask questions.

I would like help, but I'm afraid that if I go to a psychologist I will be considered mentally ill.

These are just prejudices do not think that way! If you decide to get help it is only because you need it, not because you are crazy. If you were mentally ill would you understand that you needed help? No! So seeking not only the help of loved ones, but also a psychologist or a psychiatrist is an act of strength and courage, because it comes from an awareness that you have to fight an uphill battle and getting support will help you overcome this. Certainly this prejudice is still widespread but it is equally true that it is up to you to bear and overcome this. Because alone it is really difficult to fight against cancer and any type of help is to be welcomed. In addition there are some aspects of this disease, from apprehension to deep anguish, which may be difficult for you to speak to family member about because you want to avoid making them feel bad. Speaking to a psychologist or psychiatrist, you can download your negative feelings and emotions safely. In any case, if the anxiety prevents you from sleeping and causes loss of appetite, if moments of despair increase and make it hard for you to find the strength to fight the disease, do not hesitate to talk to a psychologist. Really

there are few sick people who have asked for psychological support who have not been helped.

I have been told that I have been cured. But what if I become sick again, I keep thinking about this.

It's an understandable and human fear. Although doctors can tell you that you are cured, the pain and suffering endured in hospital wards and the treatments undergone will have left their mark, both physically and mentally, and who is to say that you are wrong to fear a return of the disease?

Elements that maintain or awaken memories are always present: the results of surgery, therapies, controls, changes in your lifestyle..... Are all signs of something that was there and could return, and this affects your sense of identity, self-perception, self-esteem and plans for the future. The ways in which people live and react to this new phase of 'Back to Life' are varied and influenced by the individuals' capacity to dealing with difficulties. Also influential is the support you receive from those close to you, their ability to encourage you and their capacity to help you regain meaning to your life.

Only with time will the fear of the disease returning decrease, but it is possible that this fear will never completely vanish.

You can learn to live with this fear, as you live with many other fears, such as 'what does the future hold for our children' or 'what is the guarantee that I will still have a job in these uncertain times'. Rather than looking for a 'return to the past', it is better to look to the future, in the sense that it is better to devote your energies into rebuilding a new life, a new balance in your relationships with others and regaining equilibrium in your life. Because it is true, nothing will be as before. In short, you must have a little patience; maybe the disease will recur, maybe not, but surely you can still lead a full life.

How do you prepare for the step from chemotherapy and radiotherapy to palliative care?

When surgery, chemotherapy and radiation therapy have finished, one needs to prepare for palliative care. This is a very delicate phase because the first thought of the patient is *'if I am not cured to be as I was before, is there is nothing more to be done?'*

On the other hand, when the traditional cures have not yielded the desired results and have proved ineffective, why continue to endure the hardships of the side effects? Is it better to evaluate a new method of treatment in order to remove the pain and ensure an adequate quality of life?

The reactions of patients and their families in this situation are diverse, from denial of the facts to a consciousness of the reality; most commonly, however, is the sense of impotence determined by the awareness of not being able to be cured.

Shock and denial, anger and helplessness, negotiation and plea bargaining, depression/resignation and acceptance of the inevitable, are emotions which can be felt, sometimes one and then the other, sometimes in a very short space of time. After a while there can be a reduction in the intensity of these emotions. Finally, the patient comes to recognise the inevitability of his own death and prepares to accept this. At this stage the emotions disappear and can be replaced by a feeling of sadness and fear, or a pervasive inner serenity, often helped by their faith. At this stage it is crucial that the patient and family members have some psychological assistance.

Questions from patients' family members

The shock of the discovery of cancer involves not only the patient, but also those close to the patient - family, friends and acquaintances. They also have many questions requiring answers.

You cannot be expected to always have the right words to say at the right time. You should not worry, it is inevitable that sometimes you will say the wrong thing.

The questions and answers which follow are intended to help address this difficult situation, but the 'magic formula', the correct mix of words and attitudes to use whilst talking to a sick person do not exist. Make the suggestions that you feel the most significant for the situation you are going through..... and good luck.

Is it better to tell them or not?

The question you should ask yourself is perhaps another: when their condition begins to deteriorate and they understand the gravity of the situation, what will they think? Have you been fooling them? That you did not trust their capacity to accept the disease and to adapt to a new life? This could have a really negative effect on your relationship and could be much more harmful than telling them the truth, however painful this may be. Because sooner or later, they will notice and maybe search for information in an indirect manner, by consulting sources that do not always rise to the occasion, which can generate misunderstanding. Do not forget that patients have the right to be told all information concerning them.

Really the problem is not about whether or not to inform the patient, but to avoid counterproductive situations, such as the total absence of information on the one hand or far too much information on the other. One should therefore try to understand how much information the patient is capable of understanding.

Another thing for the family to understand, is that they are not the only people who need to explain the situation to the patient, the doctors treating them can judge the amount of information to be given.

I am in a quandary – I do not know what to say – I do not have the courage to talk to him. What can I do?

Is there perhaps someone you know who always has the right words to say when talking to a cancer patient? Unfortunately, these situations can push relatives and friends far away from the patient, precisely because they do not know what to say. But anyone can have difficulty here. For everyone it is difficult, if not embarrassing, to start a conversation with a cancer patient.

You can be convinced that there should be something to do or say, but at that time and in that situation you cannot think of anything; sometimes it is better to be silent than to say stupid things like 'You look well' when it is obvious that they are ill.

But the most important thing is to be present, close to the loved one, offering as greater sense of peace as possible. Try to empathise with the loved one, with gestures and words that your feelings for them have not changed and despite the changes they are undergoing, the bond that unites you is as strong as before. Strive to be natural, because, let us not forget, our presence or our absence, and whatever is said can convey hidden messages. Easier said than done, you say, but when you are upset and your emotions are in turmoil.....True but we should not forget that every movement of our body 'speaks' – if the tension makes you rub your hands or bite your nails, you can be sure that the patient will notice and when you talk to him and do not look him in the eye, what will he think? But be careful, if you are normally a person of few words and suddenly become very talkative, the effect is the same; he will immediately notice your anxiety. Everything we do is sending

messages to which our loved ones are particularly sensitive, because they know us well and understand when we are disturbed. Therefore, put aside your worries and take your cue from the patient.

Is it better to talk to him and get him to respond or leave him alone? How can I tell if he wants to talk?

It is obvious that during the illness there are times when the patient does not want to talk; and having someone next to you who insists on talking can be really annoying. But this happens also in life, even to those without cancer. If the sick make no effort to hide their feelings; do not ask questions and do not respond when spoken to, and maybe even turn their face away, it is pretty obvious that they do not want to talk. This often happens in the very first stage of the disease as the shock of diagnosis leaves its mark. At these times we should always try to 'listen' if the sick person expresses their thoughts. If, however, they show signs of wanting to be left alone, do not insist that they talk. Be diplomatic, any visitors should understand that they need to keep visits short.

Show, however, that you are always ready to listen, to be by their side. This phase could be short and it is important that the patient knows that you are ready to support them. Conversely, if the patient wishes to communicate, join in the discussion, ask questions, do not be afraid to speak to them. If, for example, they complain of always being alone or ask you to leave the bedroom door open, it is clear they want company. Talking often helps to ease the tension of those who are suffering, and can remove a weight from their shoulders. Being able to voice their fears is important for the patient, it gives a bit of relief and allows them in a way to share the burden, and the load becomes more bearable.

So, when confronted with outbursts and confessions, you should avoid attitudes like clock watching, or phrases like 'Do not say that'; 'Do not think about that' or 'I do not want to hear you say that'. This blocks communication and prevents the patient from opening up to you.

Whilst listening to the patient in this way, it becomes easier to show all those gestures which demonstrate how close we are to the patient, a caress, a kiss, a bit of pampering. And if you really cannot tell whether or not they want to talk, just ask them. 'You want to talk for a bit?'

What topics should I deal with, what do we talk about?

First of all we should talk normally. If you visit a close friend who has been diagnosed with cancer, with whom you share a passion for football and maybe you often went together to the stadium to see the team, do not suddenly stop talking about it. Continue to discuss an offside not given or an invalid goal. But do not be afraid to talk of the disease if you see that he wants to talk about it. Remember, that reluctance to talk about the disease is very individual, be prepared for a simple question to be rejected out of hand.

It is important to understand whether the patient wants to talk about the disease or prefers to focus on something else. If they show they are quite happy and do not have any concerns, do not hesitate to follow their lead, this will help ease the tension. It has been shown that not speaking of fears or distress in these situations can make them appear greater, instead try to bring them into perspective. If however, you notice that they need some privacy, or just have a desire to give vent to their feelings, learn to be a good listener. Sometimes it is better to be a good listener than give improbable opinions (because we will never be able to answer all the questions a cancer patient has). So, do not stop them from talking, but show that you are listening to every word they say. On this subject, there was a significant research, carried out years ago in the United States, which showed how valuable having a good listener around can be to sick people.

Indeed some patients have volunteered the information, that when talking about their problems, it helps if the listener just nods, or uses simple expressions such as 'I can

imagine' or 'Yeah' or 'I see'. This helped so much that after just one visit they felt much more positive and were looking forward to seeing that person again.

What if talking upsets the patient?

This danger is just in our minds. Science has shown that asking a patient how they are feeling does not increase their anxiety. In fact it is a way of allowing them to blow off steam and lighten their load. If anything, this makes them feel better, especially if you are close to the patient, and sometimes saying less makes the patient feel worse. In fact he could ask why do you not say anything, why do you not talk about my illness. What conclusions do you think he will draw from this? And, please do not ever belittle his illness. He is fully conscious of his situation, the pain and the suffering which must be supported, fatigue and difficulties and all that is to come.

In this regard, there is another passage of the short story "The Death of Ivan Ilyich" by Leo Tolstoy, where the protagonist hates his family because they belittle his problem and he gets angry for their superficial attempts to avoid the topic of his death. The greatest torment of Ivan Ilyich was the lie that they could cope with him being sick but not dying, a lie which was accepted by all, who knows why. It was enough that if he was quiet and cared for, there would be a great improvement. But he knew that whatever he did, there would be nothing but suffering and death. This lie tormented him, but even more he was tormented by the fact that everyone knew that he was dying but no-one ever acknowledge this fact, which in turn forced him in turn to take part in the lie.

This lie was perpetrated by those around him even on the eve of his death, a lie which he felt humiliated him and was terrible for him. And strangely, he had been tempted many times to should in their faces, please stop lying, you know and I know very well that I'm dying; but he never had the courage to do it.

What should I do to make him understand that I am willing to listen?

There are things that it is good to keep in mind when confronted with a sick relative or friend. It is clear, as we have said before, you must first demonstrate you are willing to talk and listen. When you visit a sick person and do not move away from the door, keep looking at the clock, answer your telephone when it rings and do not even take off your coat, how do you think he will feel?

The patient must feel that you are there for him, take off your coat and sit down, preferably not too far away from him. If he is in hospital, and the rules allow it, sit on his bed. If you can, get him to talk, it is possible that there will be sensitive subjects to discuss and it may be painful for him to talk of these; your closeness will be very important, put your arm around his shoulder or hold his hand. This closeness will depend on you being able to create a climate of intimacy and trust.

Since he became ill he is no longer the same, I do not recognise him anymore.

People who face cancer, and who manage to beat it, often radically change character. They have experienced the disease, come into contact with death and with the fragility of life. This often leads people to focus more on themselves, to be able to enjoy the little things, and to not put off doing things they have always wanted to do.

He often gets angry with me, sometimes it's really annoying. I do not know how to deal with this.

This can happen particularly in the first phase of the disease when the patient is full of anger about what is happening, and unleashes this anger on those people who are closest to him holding them responsible for all his problems. At this point it becomes unbearable for relatives and friends and it is possible that his aggression can really irritate you. The diagnosis of cancer is a traumatic event for the family, who in conjunction with the patient,

experience acute shock, anxiety, astonishment and disbelief. These are not good times for those who are dedicated to the care of their loved one. But we must try to put ourselves in his shoes and not take his outbursts personally. He is not angry with you but with the disease. In most cases, this aggressiveness is a real cry for help that is directed towards those closest to the patient, those who love him the most. It is important that there is someone there to listen to this cry for help and is able to give a prompt response. However, make no mistake your love and dedication will surely be of great help to the patient. Of course, should the anger be constantly aggressive, it is good to seek the help of a psychologist.

How can we help? What attitudes should we take?

Most patients who tell their story highlight the fact that the role of the family and friends was essential. This is a role that must contain certain characteristics; stay close, share the pain but also convey optimism and positivity. The sick generally do not have a particularly optimistic point of view and tend easily to see the glass as half empty. Those near them should help the patient to see that in fact the glass is half full and they should appreciate life for what it is, a sort of 'carpe diem' (seize the day) giving moments of lightheartedness. If you are unable to do so, ask for help from others. But please do not show any feelings of pessimism or mistrust to the patient. If you are not able to hide your feelings, do not visit the patient often, he needs help not compassion.

Sometimes I cannot face it and I want to cry

It is only human that you want to cry, even in front of the patient. If this happens, do not be ashamed, let the tears flow. If it were you that was sick, you will realize that he too would be crying in the same way for you. Also, sharing pain makes the two of you stronger, it is not a communication of pessimism. Do not force yourself to hide your sorrow, this could just make you ill.

I feel so angry

It is normal for you to feel angry and made with the world, but it is not you that is sick. Between you and the patient, who is it that needs the most support? It is not up to him to support you, it is you that should be close to him. **Never forget this.**

I am finding it hard to accept the situation

This reaction is very common. It is not at all easy to accept that a loved one can have cancer. You are not prepared for this. It is difficult to accept a diagnosis of the disease, especially if it is serious and could lead to death. Some people get angry, there are those who are afraid who break down and fail to find the strength to cope. Many seek a way to ward off reality and in doing so become overprotective of their sick friend or relative.

Let us say that there is no 'right' or 'wrong' way of dealing with the situation. Reactions are predetermined by the character of the person, and each person is different from the other. It is normal for us to have different reactions in the face of illness.

It is evident that cancer also completely changes life for friends and relatives. The first thing to do is not be alone; get help. If the patient needs to be near loved ones and needs help, even relatives and friends have to find someone to give them a hand. It is terrible to find yourself handling this situation alone.

Secondly, look after yourself. In order to treat the sick we must always be one hundred percent well ourselves. Family members often tend to put their own needs in second place. One cannot be available 24 hours a day, you need time to rest. Even family members need to recharge their batteries, each of you will know how to do this. If you also become ill, you will be of no use to your loved one. Instead of being a help, you will become a burden and

slow down the course of treatments for the patient. Also if you think you may need psychological support, do not be ashamed and do not hesitate to get help.

What will happen after surgery and the hospital stay have finished, will he be able to return home?

It is clear, that whilst the patient is in hospital, he feels reassured that he is getting all the treatment and care necessary, but there is a danger that he can become 'institutionalised'. However, when the patient returns home, the life of his family is inevitably disrupted. They have to take care of him, often with new tasks to perform. In particular, if the cancer is quite severe it could stop them carrying out their normal daily life.

Sometimes everyday life has to be completely reorganised; family and friends have to face new commitments and unexpected expenses, whilst the patient being unable to carry out their usual tasks, may feel useless. There is a risk that the carers will ignore their usual duties which could upset the balance of their lives. It is therefore necessary that family members and friends overcome these difficulties, always taking into account firstly the needs of the patient but secondly not forgetting their own needs.

You must build a new equilibrium – the old one can never be recovered.

I can never accept the disappearance of the person they used to be

The possibility that the disease has taken away the best of the patient needs to be taken into account. Despite medical advances, it still leads in many cases to death. This is not easy to accept, especially by those who are closest to the dying patient.

In most cases the process of preparation for mourning begins when the patient is still alive. Who can stand next to a terminally ill patient and not wonder how it will be at the moment of death and what will happen after that.

After death it is normal to undergo a period of shock, of sadness, as well as experiencing anger. If you had been together for many years you can feel disorientated, an emotional reference point in your life is no longer there. You should be aware of this and be prepared not to fall into despair. But how do you recover from what has happened? It is very important to have loved ones close who can be of help and comfort; the so-called 'extended family' can provide the necessary support. But a critical step in overcoming grief is to re-direct your interests and passions into new projects, new goals, choose new activities, maybe make changes in your home, take up a favourite hobby that up until now you had no time to pursue.

If you carry out these activities, you will be able to cope better with your loss. This does not mean that you are doing an injustice to your loved one, as many seem to think, but you are accepting what has happened and recognise the need to go forward, to continue living, especially if there are other people, such as children, who you must consider.

Did I do enough?

Answers to questions such as this are difficult to answer. Did I stay close to the patient? Did I do enough to support them? There is always the fear of not having done enough.

You may have spent days and nights at his side holding his hand, even when he was sedated. Faced with such a disease, especially if it has led to death, it is obvious you ask yourself these questions. And it's only human to think this way because one always feels inadequate in situations of this kind involving many emotions.

There can be no peace of mind. You think you did not answer satisfactorily all his needs, even when you know deep down that you did everything you could. It's very hard to suppress the guilt which can very often happen in these situations. It reminds us of all the moments in which, perhaps, we could have acted differently, talking instead of silence, or

vice versa, should I have comforted him or encouraged him..... You live in a state of distress. We repeat; it is a completely normal state of mind. It is understandable to question our behaviour for the simple reason that there are no absolute correct or incorrect approaches. You should not be too harsh with yourself. Even those who have been close to a person who is suffering and has suffered with them, this question arises. Did I act in the correct way at the correct time? Did I make mistakes? You must not feel guilty for your own shortcomings or moments of weakness. One thing is certain, you were there for them and this is definitely the thing which matters most.

Will I get cancer too?

This is not an unusual question among the family of a cancer patient, in particular their children. The fear of being carriers of a genetic mutation which predisposes towards cancer can be strong.

What can one do in such cases?

In the first place, if the patient had an alteration of DNA that predisposed him to the development of a tumour, this does not mean that you will automatically get cancer. Where you encounter a certain recurrence of the same disease amongst relatives it would be worthwhile to consult a medical geneticist, who will evaluate the case and decide whether to carry out a genetic test which will highlight any mutations. It is a simple blood test that is usually offered to those who have already had the disease.

There are around fifteen types of tumours that have been recognised as being hereditary (breast, ovarian, colon and rectum cancers).

Particular attention must be paid when the same cancer occurs in a family in several generations (grandfather, father, and son) or when a type of cancer is present in one or more family members of a young age or when a family member develops difference tumours. In these cases, a genetic test might be recommended.

What is this test gives a positive result?

From a psychological point of view how would things change? Probably not much, because those who encounter this situation are already living with the fear that the cancer may also affect them.

It is clear, that knowing what to expect and what the risks are, check-ups become necessarily more frequent than for those of a person with a low-medium risk, and in some cases it may even be necessary to intervene with 'preventative' surgery. It was revealed by the actress, Angelina Jolie, to the New York Times, that in the spring of 2013 she had a double mastectomy when she learned that she had the defective gene Brca1 which substantially increases the risk of developing breast and ovarian cancer.

In Italy about 50,000 cases of breast cancer are reported by the Ministry of Health each year, but only 5-6% of these are hereditary. It has to be said that of these five to six percent, 70-80% are at risk of developing the disease.

It remains to be said that this concerns not only the family, but also those with cancer. There are many parents who discover they have cancer and are concerned that they have passed on the defective gene to their children.

As we conclude this chapter, we want to offer some of the messages that cancer patients have sent to the Chief Psychologists of the Cancer Association First Aid after having used their service.

'Good evening doctor, once again your kind words have calmed me. I greet you with gratitude, and I will try to be more serene, until our next meeting. See you soon'.

'Good morning, I wanted to thank you for your words. For the first time I was able to talk about my personal journey. I felt guilty that all the attention moved from my mother to myself, but I think that it was necessary. Thank you for your help'.

Dear doctor, today I did not go to the hospital; I had a temperature and was not feeling well. The chat with you yesterday made me feel better; and thus I am now able to rely on your palliative care and now believe the oncology department cannot help me. As you suggested, we need to save energy for nice things like being with my family and friends. This weekend, along with my husband, I am arranging a dinner party. Talk to you soon, greetings'.

'Good morning doctor, I am writing this message to thank you for our discussion yesterday after which I was no longer afraid to tackle the subject of my incurable illness with my children'.

'Thanks again for your sensitivity and professionalism which we have been unable to find elsewhere'.

The diet to follow

How important is the right diet for a sick person to help them better deal with the side effects of treatment and to offset growth or recurrence of the tumour?

When one hears talk about the relationship between diet and cancer one always thinks of foods that can help prevent the disease. In this respect there are many suggestions, which do not always take into consideration just what is needed to help people whose cancer has already been diagnosed, both to address the discomfort caused by the disease, and to alleviate the side effects of treatment and even to oppose the growth or recurrence of the tumour. Suffice it to say, as some research indicates, that almost 20% of patients do not heal because they are eating in the wrong way.

It is clear that each patient requires customised directions; and here it is impossible to go into detail. We can however offer general advice that would be good to follow.

The disease and treatment causes significant effects on the metabolism. There is almost always a significant weight loss (it is calculated up to 40% of cancer patients have already lost weight at the time of diagnosis or have nutrition problems). The exception to this is women who have had breast surgery and therapy who tend to gain weight.

In both cases, these are situations where it is necessary to take action. The first, because it is necessary to strengthen ones immunity in order to gain the energy needed in coping with the disease so that treatment can be effective. In the second, being overweight does not help the confidence of sick ladies and their already precarious hormonal balance.

As has been mentioned previously, suitable food can help counter effectively the side effects of treatments; from nausea to vomiting, from constipation to diarrhea. For cancer patients it is of great importance to maintain their weight as gaining and losing weight may negatively affect the efficacy of drugs and treatments. Psychologically, seeing yourself getting thinner and thinner is not good, it constantly reminds you that you are ill.

We now go into detail and will answer some specific questions.

Chemotherapy, radiotherapy or the administration of new biological drugs often cause nausea and vomiting, which, if not adequately controlled, can propel the patient into stopping therapy and as consistent treatments are fundamental, how do we counter these side effects?

It is said that a small daily dose of ginger is an excellent remedy (women who have been pregnant probably know this), and sipping soda is a classic popular recipe (which still works). The best way to counteract nausea and vomiting is to have many small snacks during the day and not concentrate on three main meals. Small snacks are easier to digest.

One should avoid heavy meals, as well as excessive amounts of fatty foods, fried or spicy foods. In short, do not eat creamy cakes. As for liquids, it is recommended that you take only a few sips during meals, it being better to drink between meals and preferably water.

If your appetite is unsatisfactory, you should do everything you can to make food more appealing, garnish with the foods that you like or maybe stimulate your appetite with an aperitif and create the ideal environment. Eating should be just as much of a pleasure as it was before you became ill.

Remember the words of the ancient Romans who said that the mouth is the first stage of digestion. Do not hurry, chew slowly taking as much time as you need.

Then forget the idea of a nap after eating, never lie down for a couple of hours. If you can take a walk, in addition to aiding digestion, it will also improve your appetite. If cooking makes you feel nauseous, do not hesitate to get help or use cold or frozen foods.

For some patients the various therapies can cause constipation or diarrhea. In these situations, the following suggested actions apply to everyone, not just for cancer patients.

In cases of a lazy intestine it is fine to adopt a dual strategy. On the one hand avoid certain foods (broccoli, onions and peanuts) which can cause the formation of gas. On the other hand focus on high-fibre foods (bran from whole grains for breakfast), vegetables and legumes such as lentils, beans, peas and fruit (kiwi and apples, the latter possibly eaten unpeeled), and especially drink a lot of water and tea.

For those suffering from diarrhea, it is as well, first of all to replenish lost fluids but avoiding alcoholic and hot drinks. Stay away from fatty and fried foods, cold meats, cheeses and sweets. Limit consumption of fruit, vegetables and milk, instead eat foods rich in potassium and sodium, such as bread, brown rice, lean ham, fish and some fruits such as bananas, apricots and pineapple which have astringent properties.

Should you suffer from flatulence, in addition to chewing and drinking slowly, avoid certain foods such as beans, cabbage, artichokes, grapes and soft drinks and ask your pharmacist for a carbon remedy.

It can be very uncomfortable to have an inflamed or dry mouth, and difficulty in swallowing can be the result of treatment for some tumours, such as brain tumours which reduce salivation. Cubes of ice in fruit can help you return to swallowing and normal chewing. Feed yourself with soft foods (ice cream, puddings, or cooked fruit and soups). Whilst it is good to avoid dry foods, crackers (not spicy ones) can be added to dishes to enhance the taste. If drinking with a straw is easier for you – do it.

It is evident that chemotherapy or radiation therapy can cause tiredness and fatigue. Making up for this deficiency by eating sweets could be counter-productive, especially if the fatigue is accompanied by diarrhea, it is best to focus on foods such as grains and legumes with a little extra virgin oil added. Dried fruit, unless you suffer from constipation, is also OK to eat.

However, as I said before, if you have difficulty cooking do not be afraid to rely on frozen or pre-cooked products.

There are also those who suffer from a loss or change of taste, foods which they used to love have become disgusting, or are without flavour. Often it is a temporary situation, do not give up the foods you like but add spices such as rosemary, basil and mint which make them more acceptable to you.

A different kind of problem, is that of woman who have had breast cancer, they become overweight and in some case obese. This can cause other diseases such as cardiovascular infarction or stroke.

There are traditional suggestions for those wishing to reduce weight such as limiting sweets, fats, fried foods, bread and pasta, reducing the consumption of sugar and focusing on lean meats and fish, maybe cooked grilled or steamed, increasing the consumption of fibre, fruit and vegetables and preferably drinking skimmed milk and yogurt with a low fat content; also increase, as far as possible, physical activity.

Finally, it should be remembered that there are increasingly frequent discoveries which highlight the goodness of some foods in cancer care and even in some specific cancers. For example, a study by a consortium of the Fox Chase Cancer Center and Pennsylvania State University found that a diet rich in blue fish (which contains fatty acids "Omega 3", already known for their benefits to the heart and brain) is particularly effective in slowing or even

stopping the proliferation tumour cells in breast cancer by a factor of 3. This is revealed by there being fewer cases in women who choose a Mediterranean diet rich in fish compared to those adopting a Western diet.

Anything that can help

From natural cures, useful in dealing with the pain, to those treatments that can help in the recovery phase of the disease; from physical activities which can help reduce the chance of complications, occupying the mind with musical or artistic activities to caring for pets and above all, your physical appearance.

Despite the difficulties of the disease - and they are many - it becomes all the more important to value all the positive things in life which can help us on our road to recovery. That's why it is crucial for the patient and for his family to find even small moments of well-being in the long, difficult and at times painful days ahead. It could be reading a book, watching a film, a walk with your dog or a game of cards with friends. Gardening or taking up an old hobby again. Focusing on a pleasant task will stimulate the patient and above all will take his mind away from the disease.

Natural cures

When we talk about natural cures it must be understood that these do not replace traditional anti-cancer treatments but are complementary to any treatments.

Acupuncture, herbal remedies and homeopathic medicines are not anti-cancer drugs and absolutely **cannot** take the place of chemotherapy, radiotherapy or hormone therapy, but they are able to help control and manage some of the side effects of these treatments. However scientific studies on their safety and efficacy have not yet been completed. Even in Italy the use of these therapies is spreading and are proving useful in dealing with pain, the side effects of radiotherapy or nausea and weakness caused by chemotherapy. In the latter case, for example the use of flower pollen or dry extract of eleuthero coccus (Siberian Ginseng) have been used successfully. Ginger or flaxseed have also been used to counteract moods and depression and also seems to help patients endure pain and fatigue. Some relaxation techniques, or acupuncture can also help. Massages can give a feeling of general well-being.

There are other medicines which can combat in the same way the consequences of radiotherapy and chemotherapy, but these drugs can also have side-effects. The homeopathic product is often better tolerated.

In any case, you should always let your doctor decide which treatment is best to follow, and if the use of any natural cures would interfere with the cancer therapies.

On this subject, an important feature in the care and recovery from the illness are spa treatments. A French study of a group of women treated with surgery, radiotherapy or chemotherapy showed that those who had undergone a two week thermal cure had benefited greatly. During the nine months following the end of treatment they had a better quality of life, with fewer episodes of depression, better sleep patterns, undertook more physical activity, were less obese and found returning to work easier. These effects were still being felt after a period of two years, with a further improvement in the quality of sleep.

The environment

More than one research has shown patients who have access to nature recover more quickly. Being able to see through the window, a tree, a meadow, a forest is much better than a glimpse of a construction site or a wall. In short, nature is good for your health.

It is no coincidence that a project by Renzo Piano for a new hospital to be built in Milan provided that each room should have a small window looking over the park and enabling each patient to enjoy the view of the tall trees and gardens.

'If I saw a tree, I felt better' - said Dr. Roger Ulrich, founder of the first interdisciplinary center between medicine and architecture University of Texas and pioneer of research on curative gardens, recalling his experience as a child in hospital. 'When one is immersed in a cold environment, as functional and scary as a hospital, the mind looks for a way out towards normality'. In the US there is even an association, Hope in Bloom, planting gardens, terraces and balconies and preparing homes for women who have had been treated for breast cancer.

Physical activity

Playing a sport or at least engaging constantly in a physical activity is crucial on the path to recovery. Those who are ill tend to think that everything, including physical activity, might compromise their road to recovery. This is absolutely not true. Rather the opposite, lethargy helps cancer. Often you read the importance of physical activity in the prevention of illness, it is equally true for those who are ill.

Of course, there are situations in which you cannot be bothered to move, but you must do so if you can. Indeed numerous studies have shown that physical activity has helped patients face the debilitating effects of treatments. Then, once healed, keeping fit will significantly reduce the likelihood of a recurrence of the disease.

Because physical activity definitely helps reduce stress, anxiety, depression, and it is possible, although there is still no firm evidence that it contributes to the enhancement of our immune defenses. Not only that, exercise helps you cope better with cancer treatments and reduces the chances of complications. Several studies have shown that regular physical activity is a valid system of counteracting some of the side effects of cancer treatments. It counteracts, for example, the fatigue that chemotherapy often causes and helps to reduce a lot of psychological problems, beginning with anxiety. So taking physical activity can help with even the most unpleasant side effects of any treatment.

But which sport should I take up? Not everyone can claim to reach the standard of runner Ivana Iozzia who, after being cured of breast cancer returned to run and win prominent marathons. However it would not hurt women recovering from breast surgery, to do a bit of Nordic walking which allows you to keep using your arms. Whilst it would be better to avoid cycling, at least for a while, for those who had a prostate or colorectal cancer?

Cosmetic care

Beauty will certainly not be a first concern with a woman who has been diagnosed with cancer, but once it has sunk in that she is sick, it will be an important aspect to her life. It is important for a woman to feel beautiful, it is important for her general feeling of well-being and her ability to deal with the disease. We live in a society where beauty often matters more than everything else.

A woman who looks in a mirror and is not happy because she thinks that she is too fat or too thin, maybe she has lost her hair this makes it more difficult for her to deal with the treatments to come.

She needs space and help to care about her appearance. There are many products available to help with her problems. First get yourself a wig, maybe even before starting chemotherapy, so that when you start losing the first few strands of hair you will be ready to face alopecia. There are also a large number of available for a perfect makeup, moisturisers

for face and hands (the skin during treatments needs to be hydrated – in this case it is good to also drink plenty of water); special bras for women who have had mastectomies.

In conclusion, go-ahead with foundation, powder and blush, without forgetting that for those who have suffered amputations, there is now cosmetic surgery available that was unthinkable only a few years ago.

Occupy the mind with art and music

Cancer is not fought only with exercise: keeping the body fit is important, but you need to look after your mind as well. Art, culture and music are important tools to help with the quality patients' lives, they help them cope with the psychological suffering that often comes to the cancer sufferer. Drawing, painting, sewing or playing an instrument are activities which, on the one hand, occupy the mind of the patient, stopping them thinking obsessively about the disease. On the other hand, they prevent it becoming the only topic of discussion. According to some research, patients use fewer painkillers if they are engaged in artistic activities. There are studies being carried out to see if music can help you relax and overcome the stress of the illness and treatments. In North America, alongside conventional anti-cancer treatment they use several artistic activities, as well as prayer of meditation to relieve anxiety. These practices are slowly being adopted even in Italian hospitals.

Needless to say, music therapy, art therapy and so on are useful not only to the sick, but also to their families who also are suffering from a psychological point of view.

In any case, keeping your mind occupied is always helpful. So thinking about what can and should be done, what goals to pursue, can only be a good thing. We repeat again the words of Anastacia, the American singer who fought cancers not once but twice. 'It's easier to deal with the bad times in cancer treatment if there is something you cannot wait to do. Having goals helps, it does not matter if you have to delay them for a while. Sometime I did not achieve these goals, but that's OK'.

Take care of a pet

Working with children and adults can help but caring for an animal is even better in dealing with disease, even cancer. The benefits of 'pet therapy' have been known for some time. One of the first doctors, Hippocrates, advised his patients thus. The best results have been shown with children and the elderly, especially those with physical disabilities, but animals have also helped in giving positive results in those suffering from cancer. In fact it has been shown that this form of treatment has given sick patients more self-confidence and allowed them to face with new energy and courage the treatments they are undergoing. Pet therapy has also been shown to relieve physical and psychological suffering. Children, in particular, have benefitted from being near to dogs or cats. They establish an emotional relationship with them, when they stroke them, play with them and feed them, it helps significantly in overcoming pain and the fear that comes with cancer. Research has in fact shown that cancer patients respond better to treatment and fear cancer less if they have pets to look after. It is definitely true that dog is a man's best friend.

Stories you should know

There are many men and women who have overcome the disease, who now have chosen to tell their stories. Their experiences are an incentive to those who are fighting cancer.

Laura Erba

"Do not be afraid and do not be ashamed to seek psychological support: it can be a great help and may change your life"

Laura has already fought cancer twice, in fact, three times, because after her diagnosis her father was also diagnosed with cancer. Yet she speaks with captivating frankness. It was not easy for her to get out and about. "It got to the point of giving up because I could no longer bear the weight on my shoulders" confesses 56 year old Laura Erba from Villasanta who has been battling the disease since late 2004.

When she was 45 years old, Laura went for routine mammography and ultrasound tests. The first test did not give a negative feedback, so a friend advised her to take a second test as they could see a lump, and recommended that she have it removed. In situations like this one looks for solutions, so she immediately referred herself to the European Institute of Oncology, who recommend that she keep monitoring the lump, but at this point no intervention was mentioned.

At first she listened to their advice. But then she met a neighbour of her mother who had had their own problems which had been solved by surgery. The neighbour told her rather brusquely that she should not wait any longer, the problem will only become bigger. They recommended that she make an appointment at the Monza laboratory created by Women's Health who work in conjunction with the Cancer Institute of Milan.

"I met a young male doctor who immediately put me at ease - she continues – "and advised me to have a biopsy and we would then decide what to do based on the result". The result was that there were carcinogenic cells which needed removing.

"There I met the staff of Professor Marco Greek who then worked at the Institute of Cancer in Milan. All members of staff were incredible, from the chief surgeons to the cleaning ladies. For them you were not a hospital bed number, you were Laura. They operated on Holy Thursday 2005 and by the following Tuesday I was back at work".

The 'sentinel' node (the sentinel lymph node is the hypothetical first lymph node or group of nodes draining a cancer) cannot detect other problems, so she had a quadrantectomy (removing one quarter of the breast) with radiation therapy at the Monza Policlinic. Laura had twice yearly check-ups. On one of her six-monthly checkups it was found that she had another nodule, this time in the other breast. It had been about three and a half years after the first operation and Laura was back on the operating table. This time, however, the 'sentinel' node showed immediately the presence of cancer cells, and the operation was more invasive than the last, since it was to eliminate the lymph nodes. The next stage proved more difficult than expected. First there was a problem with her right arm which prevented chemotherapy. Then she decided to undergo treatment at the Cancer Institute of Milan and not the nearest clinic - San Gerardo Monza. "At that time the Monza department

seemed more overwhelming, it was not as attractive as it is today. I remember that after having visited I came home crying. And then in Milan were the staff who knew me, and there was a more colourful environment. For the first session I had bought some red Crocs and I had put them on with a pair of lapel pins. The reality is that Laura is afraid of chemotherapy. "When I woke up after the second surgery, my first question was, do I have to have chemo?"

For me it was hard to agree to chemotherapy, I did not want to lose my hair, I had been here before. I was thinking of a cousin of mine who had suffered the worst effects of chemotherapy. I was by nature a little pessimistic.

At that time I was arguing a lot with my husband, finally with the help of some particularly sensitive friends I was convinced that this was not right. I remain to this day very close and grateful to these friends.

The first session lasted over four hours and my husband was always there waiting for me. He cannot come into the treatment room, but I knew he was out there and could feel the beneficial effects of this".

Actually the treatment proved less dramatic than Laura had imagined. The worst effects, from nausea to vomiting to diarrhea were virtually nothing, she was only a little tired during periods of increased medication. The worst side-effect was hair loss. "Not so much for the loss in itself - she explains - as to the long procedure. One thinks that one day some hair will fall out and that would be it. Unfortunately it is not: it is a phenomenon that lasts days. And fortunately I was mentally prepared. The first morning I found several hairs on my pillow, I decided to take a shower, blow everything I said, and you are a princess. Big mistake, I should never have done that. At one point my body was covered in hair, just like a Neanderthal women, I just wanted to run away. I dried myself quickly, put a towel on my head and waited until my husband came back that evening. Fortunately, when he arrived, he made a joke of it and convinced me to shave my head complete. What a relief!"

Without forgetting the other aesthetic problem, since two quadrantectomies leave their mark, especially because Laura never wanted to undergo cosmetic surgery: "Had it been a radical mastectomy ... ". Yeah, but when you go to buy a bra and cannot find it, because as she jokingly says 'the right does not know what the left is doing' problems arise. You could find an old corset maker to makes bras to fit you but this could perhaps become another demotivating element.

In total Laura underwent eight cycles of chemotherapy, which became increasingly lighter followed again by radiotherapy.

In August 2010, after months of care she was granted a few days off. She did not have time to go home and prepare for this new chapter of her life, when she was met by the news that her 80 year old father had a lump in his breast. This is rare, but not unknown phenomenon. There followed the usual procedures, examinations, ultrasound, and surgery at San Gerardo Hospital in Monza where Professor Greco was now based. Fortunately, for her father the story ends well.

Now Laura has routine checks and controls, with results that sometimes give her more than a little anxiety. Like the time there seemed to be three new nodules ("I wanted to get out of control and screaming ...") fortunately, they turned out to be deposits of dead cells of fat; but there were still days of further testing and days and days of apprehension before this was discovered.

Or once the scintigraphy (a bone scan) showed an interruption of the tracer in some bones of the spine ("I had already imagined a bone metastasis ... ").

Difficult times -who was the greatest help at this time?

"Principally, my husband. Not having children I was fully reliant on him: I never hid anything, for better or for worse from him. Fortunately, unlike me, he is an optimist and he gets angry with my pessimism. When he could not get me out of the quagmire I did feel helpless ... but he was on my side all the way. Then my dad, my brother, with whom I am very close, my friends; from this point of view I was very lucky. I also had a lot of support from my psychologist.

Can you talk to us about it?

"I turned to my psychologist when my father became ill. She thought it may help me process the situation. My father did not see the need to talk, however I took advantage of her counselling. It was a hard time for me, I dressed only in black and sometimes I arrived at our appointments crying. I was going through a kind of mourning, or even preparation for my own death. I was convinced that bad things came in threes and this would be my final battle with cancer. At the beginning of my course of treatments I was exhausted and it has been vital to have someone who would listen to me – this is something even friends or relatives can do. It was time I acknowledged that for the moment I was alive. I was convinced that I needed to process the situation, whilst the psychologist made me realise that I needed to accept the situation, you cannot deprive yourself of any enjoyment in life. My relationship with the psychologist was vital and today I can say that the usual checkups do not stress me".

Can you give some advice to those who find themselves in the same situation?

"I would say do not suffer in silence. Talk about everything you need to with those around you. Sometimes it can be useful, and it was for me, to talk to someone who has undergone the same things as you. You can exchange tips and information which can help you and your families.

Finally, do not be afraid and do not be ashamed to seek psychological support: it can be undeniably the help that will change your life".

Monica S.

After the disease Monica has become the mother of Thomas. Her message: "Have courage because there is a way out, there can be a happy end".

"Look at the reality." sings Vasco Rossi "Tell the moon" if you heard him in the hardest moments of his disease. And that's when the reality was a cancer that appeared to threaten his future.

Monica S from Monza encountered cancer in 2011. She was 32 years old and had just discovered that she was pregnant with her second child.

"In June we went on vacation - she says - we wanted a little brother for Eleni, our first child. Back home I took the test and it was positive. Then I had a strange feeling, I hoped that this new baby would be healthy, and then immediately it came to me, I would rather something happen to me".

A month later all is not well: some bleeding, but that can happen (at least so they say ...). To be thorough, she goes anyway to the emergency room. There they ask her if her Pap smear was regular. It soon becomes clear that there is something wrong. "I think they quickly realized, however, they wanted to be cautious".

Further tests were carried and she was sent home. Three days later she was asked to return to the hospital, they have found some unusual results. She logged onto her computer and began to surf the internet for information. She now recognises this was a mistake. "I found everything, the worst of the worst; I thought my life was over already, a moment of real panic".

There followed fifteen days of tests and checks, the outcome mola vesicular which turned out to be 'complete'. An operation to scrape the uterus was scheduled for July 17 at the San Gerardo Hospital in Monza. "I was terrified of anesthesia, but at that time I wanted to be free of the disease."

If everything had gone to plan the operation should have been a success, and at first it seemed this way, but after ten days the concentration of beta-HCG in the blood began to rise. "They explained that it would be necessary for me to undergo a continuous course of treatment – a sort of mild chemotherapy, three injections of methotrexate together with folic acid for three days a week over three months". Fortunately the treatment worked and the values of beta-HCG which before treatment were around twenty seven thousand, at the end of the second cycle were clear.

But the eradication of the rogue cells was not the end to her problems. About two months after she started getting panic attacks. "It was not the fear that the disease would return" - she explains – "I was afraid of dying. I was terrified to do anything, I could not even drive. I ended up in the emergency room and in danger of being subjected to a heavy drug treatment".

Fortunately she had the strength to listen to the advice of the doctor and undertook gynecological examinations and is under the care of a psychologist. The first meetings were heartbreaking, but in the end I was completely rehabilitated. I think not being able to try for a new baby, because you had to wait six months, had been the cause of my breakdown.

Monica is now well and at the end of 2012 became pregnant again. . "The pregnancy went very well, but in the beginning I really had a lot of fears. And here's the happy ending June 25, 2013 Thomas was born".

A story of hope, but also difficult moments. What or who helped the most?

"Ask others for help. First my poor husband who was woken at 3am by me, he listened to me and asked what he could do to help. My mother and I have always been close, my father, my sister have all been there for me. Then my impressive psychologist, who was so young, I think in her thirties, she was definitely my escape valve and proved to be my lifeline. But it also helped me a lot to talk with others, especially those in a similar situation. It was a painful experience to enter the oncology department of San Gerardo but there was always someone to talk to, peaceful people who comforted me. I am only too happy to support others who find themselves in the same situation in which I found myself, as many others supported me".

It can't have been easy to manage the disease with a small child. Did Eleni know?

"She knew there was something wrong, because sometimes I could not stop crying. However, it was wonderful the way she hugged and comforted me. Even at school there were no consequences. I, however, feared I would not see her grow up.

Do you want to give some advice to those who have cancer?

"To have courage because there is a way out, there can be a happy end. And then get help to avoid a break down as happened to me: do not hold it all inside. And I also want to say one thing not to do."

That is?

"Forget the Internet. You only risk hurting yourself if you are not helped to understand what you read."

Roberta Mariani

There is fear, anguish and pain; but do not ever lose your self-esteem

"Maintain your dignity, do not let cancer win, I know it is not easy, but avoid crying it will help you to overcome the disease". You need to decide in which way you are going to deal with this disease. Roberta Mariani, 44 years old from Monza and Brianza, employed in a multi-national company in Milan chose to deal with it by keeping her self-respect at this difficult time. During the highs and lows, pain and fear she has had the courage to take care of herself and not to let anything slide.

It all started in July 2011, whilst on vacation. "I was taking a shower when I realised that there was something wrong" recalls Roberta "a lump just above my ribs under the breast". Maybe it was nothing, but she immediately called her mother to make an appointment at a prevention center that she already knew in Monza. "I'm not going to hide it, I was scared". The doctor they saw noted the anomaly and began with the usual questions on lifestyle etc, until it came to light that Roberta had undergone some hormonal treatment at an infertility treatment clinic. She immediately sent Roberta for a mammogram and ultrasound, which at first showed no abnormalities. The lump was under the breast so was not visible on a mammogram. Ultrasound showed that there was a possible fibroadenoma (noncancerous tumours composed of fibrous and glandular tissue) and the radiologist recommended that she return for another test in six months.

"My doctor, however, strongly recommended that I take the tests again in the radiology department of a hospital, he said it is always better to go to a hospital rather than a prevention centre". I was called to the hospital in October and knew immediately from the expression of the doctor performing the examination that something was wrong. He said "I would like to carry out a needle aspiration, please make an appointment for next week". The results were those which I feared – the lump was malignant. I felt faint; I did not understand that he was talking about me. I had no problems with my health apart from feeling tired I did not feel unwell.

Shortly after I underwent a bone scan and surgery. A nodule and the sentinel node were removed. I was quite relaxed going into surgery; I had a great deal of confidence in the surgeon who operated on me. My aunt, who worked in the hospital, assisted in the operating room, I felt protected and in good hands. I was in hospital for just two days. I did not suffer and I was happy because I thought it was all over. There was no sign of the operation, just a very small scar below the fold of the breast which was not visible. Yes, I was told that I had to undergo radiation therapy and probably hormone treatment for five years, but I was the same as before and I felt good".

The drama, however, came when I visited the oncologist for the results of the test of the sample analysed. The doctor explained that for my type of tumour I would need four chemotherapy sessions, with a cycle of 18 infusions of antibodies, plus a series of 30 radiotherapy sessions. I would also need treatment to induce the menopause in order to eliminate the production of estrogen, the main cause of female cancers.

"Then will I lose my hair?" Yes was the reply. My mother, who was with me, started to cry. I, however, felt numb, I did not understand anything. I remember the surgeon who had accompanied me on the visit to the oncologist, putting his hand on my arm. I tried to be strong, but even now, when I talk about it, I cannot be completely articulate. Two days later I already had my wig.

At the beginning of December I was asked if I wanted to spend Christmas quietly, I said yes. Then, however, my family decided that "the sooner the better," and close to Christmas came the call from San Gerardo Hospital in Monza saying that they could start treatment immediately. January 2 was scheduled for the examination and the next day for the first chemotherapy session. "It was a long day: a morning of talks with doctors and nurses and early afternoon chemotherapy session. "I was the last one. The department was comfortable, the people there seemed relaxed and the nurses were kind and helpful, but I was afraid. They put me in a room alone. A priest arrived and he immediately noticed that his presence disturbed me so he went away. I started to cry. I was moved to another room so that I was not alone but I was put into a bed next to a lady without any hair. It was at that point I realised just what having the disease meant. The nurse who was looking after me tried to comfort me by saying "That lady is fine now, can you see her hair is beginning to grow again". But it was very short and fine, and her face was grey, I wondered how she had looked when she was really ill.

The first session was fine with only a few side effects, after a few days blisters appeared in my mouth. The ordeal, as anticipated, came after fifteen days when I started to lose my hair. I remember holding the strands that I had left and took the drastic decision to shave my head. It was a real shock even though I had a wig to wear. The sessions continued with greater side-effects. We were even forced to postpone the third session because my antibodies were too low. An injection of white blood cells was prescribed but it gave me a temperature. I always enjoyed my food but at that time I could not eat much and my weight dropped from 56kg to 49kg. I could not eat as food made me feel sick. Despite chemotherapy, fever and nausea Roberta has survived.

Was it hard?

"Yes, but I always tried not to show it. The day after treatment I tried to get out, to force myself to be normal and do everyday things, even if I was not feeling well. I never let anyone see me without hair; the wig was a good investment. It was vital to me that I always dressed well, and that no-one ever noticed anything was wrong. It was important because when you see a woman without any hair you immediately think of cancer. Certainly in the house I took off the wig but I bought several colourful scarves and hats. Often returning from treatment I called into the drugstore to buy a lipstick or some makeup. I never wanted to give the impression of being ill, it would be humiliating. Instead I wanted to give the impression of being better than I was, but it was not easy.

Is that an attitude that you recommend?

"Of course. It is important that the consequences of the treatments do not take away the desire to take care of ourselves. We must not get caught up in laziness; it is vital to help yourself with a wig, a new dress, maybe experiment with new makeup. The psychologist who supported me at the time and who still monitors me, asked me to participate in an initiative of an association that helps women undergoing cancer treatment to take care of themselves with the help of a beautician to improve their appearance using makeup tricks and products. This helped me a great deal".

Were there many obstacles to overcome?

"I only had to look in the mirror to remind me that I was still alive. In my most difficult phase, when I came out of the shower and saw I was so thin and hairless I felt bad. But it was only me that saw me like that. I do remember an episode that made me embarrassed; at the radiotherapy centre, they made to take off my wig, I had nothing to cover up my baldness and it was not easy to be seen that way".

Were you afraid of the treatments?

"Yes, I was afraid of the pain. The nurses told me that whilst undergoing chemotherapy I was supposed to keep still, because of the danger of leakage of the drug, and I was obviously scared. The drip was not painful and the side effects are better controlled than they were in the past, it is not however a walk in the park".

Were there were times when you thought you would not make it?

At the end of six months of radiotherapy I had a breakdown. The radiation oncologist sensed my discomfort and strongly recommended that I get in touch with the hospital psychologist who helped me and continues to give me support. The moral and material support of loved ones was very important. My family was always there for me".

Has anything positive been learned from your experience?

"Obviously the disease itself has not been a positive experience. I can only say that this enforced break made me slow down, to spend more time with my family and to look at life in another way.

For example?

"I look at life in a different way, to tackle problems one at a time, spoil myself a little bit and enjoy everyday things. I would like to do many things at once, things I always postponed. We think we are omnipotent, that things which happen always happens to others, then in a moment we realize that we are vulnerable and it changes our outlook, the future.

E.P

"It helped that my daughters and my sisters were very close to me, but I must also mention the support from my psychologist. If I had not had their support I do not know how it would have ended. On these occasions one needs all the psychological support one can get.

When I discovered I had cancer, I found it difficult to understand I did not take it seriously. And that is not because I was superficial, frivolous or was ignoring it, but at the time my mind was occupied by other things.

That is what happened to EP from Valtellina in September 2010. Until then there had been no symptoms of the disease, no pain, no lumps.

She had not had any tests for a while, until one day her doctor suggested that as she was now fifty years old, it would be good to have a checkup.

The pap test was negative, move on to the mammogram.

"When I received the report - she says - I read it immediately. I was in a state of shock when I opened the envelope; I did not know what to think. "

For two months she was in and out of hospital. Her partner was in a vegetative state due to a brain hemorrhage and she was devoting her entire life to the man with whom she was deeply in love. So much so that she almost ignored her cancer, or at least it was not her priority. "In my head there was total chaos" she recalls.

She underwent a needle aspiration on her breast and cancer was confirmed. However she was still making her partner her priority and in a sense 'delegated' the management of her treatment to her daughter and sisters to make an appointment at the European Institute of Oncology in Milan. "At that moment I just wanted to ignore the problem completely because I had other things to think about."

The mastectomy took place in November and it was only then that she began to focus on what had happened to her, when she could no longer feel her breast and when she looked in the mirror. "Then I realized what I had lost. It seemed to me that everyone I met looked just there. I could not stand them saying that I looked well. I felt I had to justify how I looked; it seemed to me that people were expecting me to look sick, but now I felt good. I then had hormone therapy and continue with half yearly check-ups. There is always some apprehension before these check-ups – she admits – if something is not quite right you immediately think the worst. Let's face it – it is never finished even if everything is OK."

How did you tell your loved ones?

"I told my daughter, who was then 34; I know that it could have been worse. I therefore invited her out for a pizza and told her everything, I did try to reassure her about the extent of the tumour and that prospects for recovery were good

And to others, in your working environment?

"I have never stopped working, except during the treatment I work in the social health sector and I enjoy my work, it is one of the most important things in my life. I never wanted to sit at home; I cannot live without my work. There was a point at which I feared that the disease would prevent me from working. In respect of others, however, I must say that cancer has allowed me to reconnect with childhood friends that I had lost. There was one particular friend with whom I had grown up, who had also had the same disease. As soon as she heard about my illness, she visited and was able to give me some good advice. In short, a bit of solidarity between healthy patients certainly it does not hurt. Of course, there are also those you tell, friends, relatives, who had this, that I had that "

What was your worst moment?

"When I found out the outcome of the needle aspiration which confirmed I had cancer. At that moment I lost my usual self-control and cried. They told me that nothing could be done; at that point I really thought the worst. I suffered from flashbacks, and revisited all the people I knew, especially people from my first job when I was involved with the terminally ill. After I went into the office I remember the first person I met asked me how I was, my reply was "very bad". I could not talk anymore and I left. Who knows when the best time to talk would be?

Tell me

It may seem strange, but it was when I was told that after the operation my illness could be treated with hormonal therapy. Clinically, this is not always a positive sign or an indicator that the disease was not so serious. I was terrified of chemotherapy and radiotherapy and if one of these treatments was recommended, one should assume the worst. I really thought that with a tablet the situation was under control and I could continue working. "

What helped in difficult times?

The nearness of my daughter, my sisters but I have to recognise that the relationship with my psychologist was a huge help. If I had not had their support, at times I do not know how it would have ended. I could tell my psychologist things that I could tell no-one else, not even my daughter with whom I had always been very close. This confidentiality was fundamental to me. Even group therapy was useful. There you could meet and listen to other women, their fears and anxieties are the same as yours. You have many questions, and that is why it is vital to get help from an expert who is familiar with this type of situation. There are things that are difficult to express, you cannot and do not want to tell anyone, even your loved ones. There must be someone to whom you can talk, and who helps you to express your feelings.

How are you now?

Well, OK but a part of you is gone. Yes, it is true that today reconstructions are possible, but amputation is always traumatic, you look in the mirror and you are different from before.

What would you recommend to those who discover they have cancer?

"First of all to get help. But do not go on the internet, as did my daughter, to look for information. There you can find everything, but little that is of any help, indeed it can misinform you and make you feel worse. When you are faced with this you are scared and you cannot overcome this fear. That is why you need someone, like a psychologist, who can help you bring these feelings out into the open. It was this help which made me feel stronger."

Severina Villa

"This stuff we have, we keep it inside and learn to manage

it in the best way and with a smile"

It begins with the tale of Severina Villa, a 52 year old from Brianza Lecco, and who wrote a diary which enabled her to deal the disease. "Writing has helped me to cope," is the first thing she tells me when I meet her.

She hands me her book "Affected by the fragrance of my roses", sixty A4 typed pages, well bound and on the cover a rose garden. In it she explains "telling my story my way became a habit, it was a pastime which comforted me and allowed me to reveal my innermost thoughts". With the passing of time, each scene remembered and then written about became like a soothing ointment, a useful tool to heal and soften all my emotions and anxieties". It all began with a phone call urging her to go to the hospital for further investigations. The unpleasant lady doctor just said, "Madam, there is a lump which needs removing".

Severina quickly realised what was happening. "A poisonous snake had entered my body" she says in her book. "I began to sharpen my claws for the fight. It would be a long and exhausting struggle, that (I hope) I would win".

"My first real awareness of the situation was when I was in hospital preparing for surgery. In the room I found myself with an anxious and depressed woman, who kept repeating, like a litany "Why us?" A dirge which became unbearable and I reacted strongly. She kept complaining "Why us?" I do not understand what you mean I said. Why not us, who would you prefer to have cancer? A friend, a colleague, the shop keeper near your home, the lady at the supermarket, my children's' teacher? No, stop being so selfish and self-centered. It has happened to us, there is a reason. What we now do is to keep it to ourselves and learn to manage it in the best way we can – with a smile."

Severina had to have two operations. The second, which was unexpected, was to remove the auxiliary lymph nodes affected by the disease. She was told this whilst her husband was there, and it was she who consoled him. "Quiet, my dear, if we are united in this, as always, we will make it through".

After the second operation she met another woman who was in the same situation. If the first woman was depressed, this lady was exactly the opposite, completely up to date on the psychology to be used in their situation. She had told no-one that she was in hospital. Two different women, but Severina says that she learnt a lot from them.

"I do not know what I gave them. But the exchange of mobile telephone numbers was inevitable. We felt united by fate and by feminine curiosity, 'spying' for each other and later on sharing what we had learned and supporting one another".

Even this medicine which we called 'solidarity' was something that made us feel better, whilst we were waiting for the results of our tests. Waiting for the dawn of a new day which would bring good news."

“When I returned home I found that there were two best medicines for me. One was what I called ‘A fat layer of unconsciousness’, which helped me to just get out of bed in the morning. The other was a ‘healthy selfishness’ which kicked in just after breakfast.

‘With the “ fat layer of unconsciousness’ I hid everything – she recounts in her book - pretending not to be sick, but that I had won the lottery ‘a nice pause for reflection’. A break for myself without conditions and interference from others. This layer of unconsciousness enabled me to virtually do what I wanted, from morning until night, blissfully unaware of all those around me, the universe and the world.

I was lucky that between treatments I did not have chemotherapy and therefore did not lose my hair. This allowed me, to some extent, to protect my family, as I did not have to involve my children. The disease, however, forces you to review your relationships with others. The disease opened my eyes on my interpersonal relationships, allowing me to sort out my true friends. It helped me make a selection between real people, those people who do not leave even when the going gets tough.

There were however 33 radiotherapy sessions. It is striking, as she says in her story as she talks more about her care, the nurses who worked overnight, “they saved the lives of others and did not see sunlight until their shift ended”. Equally significant was Severina’s faith which shows throughout her story, for better or worse, she trusted in God.

Powerful in this regard was the poetry reading pinned on the church hospital board every day? ‘Before God sends you a cross to bear, he has looked with his wise eyes and infinite justice, with his heart full of love. He will not send you a heavier cross than you can bear’.

And after evaluating your courage, he declares, take this that I give you – you can bear it. Keep strong and you will climb up towards resurrection. It would be nice for other sick women to read the story of Severina especially for the humour with which she deals with the disease.

Here is just an example. At the beginning of the chapter on radiation therapy. "I'm sitting in front of the doctor who asked me, smiling, if I had agreed to come to them for a tan. The answer is that the only place where I had never taken the sun was on my breast, because I had never sunbathed topless.

Now I understand, though, that I cannot do without this treatment and, I signed the form for their "beauty farm ". In fact it makes me laugh because the service provided is only 50%, or one breast yes and the other no. It's really a strange but necessary beauty salon! "

It is worth concluding with the story of her meeting with the wife of an acquaintance who had suddenly committed suicide a few days before. "She greeted me still smiling- writes Severina - I cannot complain ... I think some people are worse off than me."

What could be worse than that she was left by a husband who knows, maybe without an explanation? But I think for her to face life and be calm we should follow her example and her ability to see "the glass is always half full." Never half empty. Remember this always.

Elisa Bonaccorsi

"It is an experience that makes you realise how important things are".

Why not me instead of him? It's the question that probably every mother thinks when she discovers that her son has a serious illness. This is what Elisa Bonaccorsi, 35 from Bormio thought when she found out that her son Peter had leukemia.

It all began in June 2011, after a party at the end of school year, Peter her son was 7 years old. "We realised he was not well, but it did not seem too serious and Peter went with his grandmother for a holiday at the beach. Even there, however he was not well and his grandmother took him to a pediatrician, but he did not find anything wrong with him". Back home, the situation worsened. "After two days we took him to the doctor who prescribed a blood test" – continues Elisa. "His back was so painful that he could not stand up and I took him to the emergency room at Sondalo Hospital". "Blood tests showed the presence of an infection and we were advised to take him to Sondrio where he was hospitalised for a week."

His blood counts were erratic and the doctors did not discover anything. "We were advised to come back in a week when the tests would be repeated. Meanwhile see how the child is and maybe take him to a more qualified hospital such as the San Gerardo Hospital in Monza". Elisa and her husband Daniel did not think twice and decided to take Peter to Monza. At 8 o'clock on Friday morning, a bone test was conducted and at noon Peter underwent his first chemotherapy treatment. Half an hour after the bone test results were received we were told that Peter had mature acute leukemia B. "It was tough" she recalls and tears come into her eyes. "We did not think that it was that bad" said Dr Momcilo Jankovic, head of paediatric hematology at San Gerardo. "He was the best person to talk to us" whispered Elisa. "But it was still very hard to take, and useless to hide how I was feeling. At that time I thought the worst and I wondered "Why not me?"

An ordeal began, which fortunately ended well. Peter stayed in a sterile room for 45 days. The doses of chemotherapy to which Peter was subjected were very strong. There should have been nine days between doses but sometimes they needed longer to allow Peter to recover. The physical consequences became evident, from the loss of hair to a severe mucositis of the mouth and digestive tract (a painful inflammation and ulceration of the mucous membranes lining the digestive tract). The pain was very strong and between the first and second bouts of treatment morphine had to be given to Peter. "Whilst in hospital he lost more than 5kg" – says his mother – "he weighed 30kg when he went in and less than 25kg when he was released". The child could not eat and was fed intravenously. Treatment had to continue even after leaving hospital so Elisa and Pietro remained at Monza as guests of a cousin. "We could have stayed in a residence next to the hospital, but we preferred this solution because we thought he would feel better and we tried to get him to do everything we could, many times we walked in the Villa Reale Park ". Treatment at Monza ended after nearly six months. He was diagnosed on July 8th and he returned to Bormio in late November.

Elisa remained at his side the whole time, even though she had Tommaso and Lorenzo at home who needed their mother.

"Now Peter is very well. We have not reached five years that doctors indicate as necessary to declare him completely out of danger of a relapse, but for us he is better. Although I must admit that when the days of checkup approach I feel anxious.

Was it hard?

"Yes, because at home I had two more sons, Lorenzo 5 and Tommaso 2 years old. Tommaso did not notice anything, but Lorenzo yes. My mother told me that he did not want to visit friends any more; he just wanted to stay at home. But the hardest moment was when Peter asked me why he was ill and not Lorenzo. I was stunned and I turned to the psychologist who explained it was a normal reaction in a child".

How did Peter cope with the disease?

"He was angry with the world. He could only stand being with Dr Jankovic; with others he swore and kicked. Cortisone caused him to have continuous mood swings. Sometimes he also hurt me ... But then he would give me a gift and asked to be forgiven. It was the most touching moment."

What did he understand?

Luckily he was still small and never felt that we could be talking about a deadly disease. He realised later, when other children that he knew in hospital did not make it. Today he is back to normal; he has forgotten the painful experience and never talks about when he had to take morphine. He remembers that he was ill but thinks it was more like a problem to overcome, maybe because that is how we always described it.

Did he need lots of cuddles at that time?

"I have to admit it: at that time I **straviziato**. And how could I not? Now I'm still recovering.

How did Daniel, his father react?

"At first it was very hard for him, when he came to Monza and Peter was crying – he struggled to stay by himself with Peter. As soon as I left the hospital for a short time, he would telephone me. It was not like him so without saying anything I spoke with the psychologist who explained that more sensitive men could be weaker at times like this. She also explained that when I was tired, he would support me, and he did.

What influence has the disease had on your relationship?

"Daniel and I are even more united but it was not easy: I saw more than one family fall apart, especially when the child did not make it".

What has been the reaction of others?

"We were lucky. Our families are close and we were given a hand without even asking: my mother moved to my house, my mother-in-law also helped me in many ways. But I also

want to mention my father, a great man, who gives me a hand in the hotel that we manage together. Customers have told me how he would begin to cry like a baby when they asked him about Peter. Uncles, too, were always present: as far as work and distance allowed they would try to visit Peter. Stephen, Daniel's older brother worked in Milan, and devoted all his time outside of work to Peter. Everyone bent over backwards for my little great champion. I have to really thank everyone”.

What can be learned from this experience?

When it happened I saw it as a tragedy. Today, it has changed my life completely, but in a positive way. I now have a secretary to help me in managing the business and I have more time to spend with my children. The experience has made me realise how important your family is.

Daniela Gurini

Being a journalist, she has decided to tell her own story. "I still remember that long day of uninterrupted tests in the clinic in Milan, waiting for results".

"You never know when it knocks on your door. Perhaps even in one of the happiest moments of your life, newly married and with many projects and ideas to materialize: one of those raising a family. And it's right there that it hits you".

"My story started in July 2010, almost three months from the date of my marriage: a honeymoon in Mexico, a "new" life together and we both hoped that we soon would become three. Right in the middle of the night I wake up with a start to a throbbing pain on the right side of my stomach. I had never experienced pain like this before, it did not fade rather it increased; and, I was well aware I was not a crybaby. I understood that this was something serious. They told me in the emergency room that it could be appendicitis but I was not convinced and made an appointment to see my doctor. Meanwhile, thanks to painkillers the pain had almost disappeared, but by the look on the doctor's face I knew it was something more serious than appendicitis. After he studied the results of an ultrasound, he sent me immediately by emergency ambulance to hospital. "Go now" – he told me- "and take some things with you as it is certain that they will keep you in. There is a mass". I had thought at first that it was appendicitis and certainly had not even considered that it could be a tumour. The pain had passed but the hospital did another ultrasound and I was admitted. A day of tests, I thought and then I would be able to go home, it was nearly the weekend and the pain had gone. They kept me in hospital and that night an intense and unbearable back pain returned. I had an emergency operation and they removed an uncomfortable cyst weighing 560 grammes and 14cm long, a monster which had taken possession of my stomach. Before this I had never had any pain, even then the word 'cancer', or rather in my case mucinous adenocarcinoma was not in my mind. Ignorance is bliss!

But then you are diagnosed and find out that you now have to deal with chemotherapy and possibly death. Nothing could be more wrong, cancer can be cured and how!

After salpingo of the right ovary (the removal of an ovary together with the Fallopian tube is called salpingo-oophorectomy), I was in hospital for ten days for more tests to enable me to 'get ready' for recuperation at the Institute of Cancer in Milan. The days and nights were long, especially for a person who had never been in hospital before. Days filled with prayers and thoughts. Many days. I wondered how my relatives and friends would react. Who knows how long it would be before I was independent again and had conquered this disease. And my husband? After only three months of marriage he found himself with an incredible burden to bear.

I noticed that people in the department treated me differently. One example, there was a cleaning lady, who until that morning had exchanged a few words with me. After my diagnosis, she came into my room with her head down, swept the floor and almost without looking at me walked away. 'She would have known' they told me. Moreover, in a small area like Alta Valtellina, tumours like mine were hardly ever seen.

One evening a nurse, whom I admired for her professionalism and openness, and seemed to have no fear about speaking of pain when dealing with her own cancer, told me of her own battle with cancer.

At that point I said to myself: "If she did it." And so I started to change my attitude.

I returned home and after twenty days whilst the wound healed, I decided to resume work.

I ignored what had happened, and told no-one except my closest friends, after all it was only a hiccup in my life. I waited for the results from the Cancer Institute. The phone rang at 12:45 on September 9, 2010. I did not have much time to decide and, at first I was almost tempted to say I would not return, I felt fine and the week after I was going to be a witness at a wedding.

Thinking it was "only" a laparoscopy, as had been proposed initially; I telephoned my husband and my parents and then told the hospital that I would be there. I thought I could probably also go to the wedding, who knows when I would get another appointment if I declined this one. But it did not exactly go to plan. The primary objective was to preserve my uterus for a possible – and so desired – pregnancy. This is what I had said many times and was in my notes (six or seven times), also on the form which I needed to sign before the operation. Of course, if you read these notes all the way through, you cannot help but be scared. This could happen, or that could happen, the side effects that come with the removal of one or more parts of your organs!

They had to carry out a thorough cleansing to eliminate any tumour cells remaining as these could spread like wildfire. There were 3 small laparoscopy holes, with a vertical cut of about 20 centimetres. They removed some 'pieces' here and there, there was a little internal bleeding and my recovery was a bit slower than expected. It was my good luck that I did not need any chemotherapy sessions. The results were negative!

It is still imprinted in my mind that long day of tests in the Milan clinic waiting for results. When I telephoned for final confirmation of the results, once the doctor was not there, the other he was not allowed to answer the phone, and then he was operating. I sat on the couch at home, petrified waiting for a response. I had to spend another sleepless night before I heard that I did not need any more treatment I just needed to recovery from the surgery.

The following months were full of tests. Preparing myself psychologically for these was the worst. One report showed some anomalies, but fortunately there had been a mistake, lucky for me. I was tired but I had conquered it and life was even more beautiful and meaningful.

Peaceful, however, it is certainly not. Her name is Valentina and she was born on October 22nd 2012 despite the negative predictions of some doctors. She is a lively, sunny, cheerful child. The greatest reward and after a dark period, a gift from God whom perhaps, sometimes I forget to thank. He helped me realise this dream. And so I leave the cancer behind. Now I think only of the present, the future and my family.

How important was your attitude in dealing with the disease

"I think a lot. Watching others and thinking "there are worse than me" has been a strong motivation. Of course, there were moments of despair and the nagging fear was always there especially at night (since I always have and still sleep very little) on how this will always be with me. But day by day I have learnt not to think too deeply about my situation, this has helped me and those close to me a lot."

What effect has this experience had on you?

"There has been so much evidence of unexpected closeness and affection. When one receives news of this kind you never know how people will react. A few friends have found visiting me difficult, and did not know what to say. I do not blame them, sometimes it is difficult to look beyond the disease, conversely I have found that people who I had thought were 'distant' approach me gently and with sensitivity".

Do you have any advice to offer?

First, do not ever associate the word cancer with death. It's true, many die; but many are cured and therefore we must not treat them as people who are dying. It harms the spirit and hinders the healing process. I also advise you not to rely only on the first diagnosis, do not be afraid to ask for a second opinion. I do not say this from lack of confidence in some doctors, but if you were going to buy a pair of shoes, you try on at least three pairs. I recommend you do the same when choosing doctors, if you can.

Books and films about cancer

The theme of disease, and cancer in particular, has often been at the centre of literature and cinema. Books and films, often told by those who have endured it, sometimes those who have survived and sometimes not. A dramatic experience that can be of reflection for many and in some cases of comfort to those who are facing cancer.

Here, here's a list: for books we suggest some directions provided by the authors or publishers. Whilst with the films, we refer to the respective trailers that you will find easily on the internet. You have the choice to read or watch, if you think it might be useful.

Books

Live: I had cancer and I'm healed - Eva-Maria Sanders, TEA, 2001.

A happily married woman, with two children and professionally successful Eva-Maria Sanders leads a peaceful life. Determined to defend her perfect life, she ignores the messages her body is sending but when she is diagnosed with breast cancer and has only few weeks left to live reacts with an attachment to life and her affections. In these pages the author tells how, little by little, she distanced herself from traditional medicine that had not been helpful, how she found a way of self-healing, how she has learned to see a great opportunity in the disease.

Why I applied lipstick on the day of my mastectomy - Geralyn Lucas, TEA, 2006.

"The only thing I can think is that somehow I must be myself in this sterile room, when this has all been forced on me. I have to remind everyone that they are not simply dealing with another mastectomy, right side, on the operating table. I have to leave a trace that says that I have been here, not just my breast. I cannot bear to go unnoticed at this time in my life, to feel like I was transparent, as the doctors who diagnosed the disease had made me feel. It was at this point that I thought about lipstick. Now it is a habit and I always carry one with me. When the nurse calls me, I think of those sentenced to death, the march to the scaffold, a gesture of defiance to show I am above the situation. Even under anesthesia, even when my breasts will be placed with care in a Tupperware box in the cabinet, I can still feel attractive "Geralyn Lucas, had just passed an exam as a journalist and won the job of her dreams, when she was diagnosed with breast cancer. Falling into despair was inevitable. Also there were too many questions which no-one wanted to discuss with her, even her husband who was a doctor. How will my life be after treatment? Will I still be attractive? Will I be able to have children? But the most important question was will I survive?

I have cancer and I do not have a suitable outfit - Cristina Piga, Ugo Mursia Publisher, 2007.

She is a woman of forty-five, wanting for nothing. A normal life, husband, two children, a job in public service. He is a "bastard" infiltrating carcinoma of the colon. She finds out one

summer that seemed like many others but instead was the beginning of a journey that no one would ever want. But if you get cancer then you'd better tackle it as the protagonist of this story: with irony, with an insulting gaze, with an unshakable will to live. This is the diary of a summer of unusual illness told with a real capacity and an uncommon grasp of the tragic and comedic aspects: the crude descriptions of the treatments and the unsuitable words of others, the embarrassment of colleagues and relationships with doctors, friendships lost and those found, the banality of everyday life - like the clothes that do not fit anymore - and the fears. Bitter sweet, poignant and funny it is the true story of a woman who defeated cancer without ever giving up, being always, in every sense true to herself.

Apart from cancer everything is alright. Me and my family against evil - Corrado Sannucci, Mondadori, 2008.

"There's a short silence between us, the doctor is aware of the news he has just given me. I am stunned by the emotional shock. Multiple Myeloma (a malignant tumour that develops in the cells of the bone marrow that produce blood cells). We are in December, will I still be here in March? Will I be able to arrange things for my family in these few months? I have to tell the newspaper that tonight I will not be at the Olimpico for the football match Rome v Valencia. My wife has to find a job. I have to help her in these days. Can a life end so suddenly, without any warning or an alarm signal? Can it end whilst we are still so young?" Corrado Sannucci tells in this book, so painful and poignant, his long battle with multiple myeloma: the discovery of the disease, the decision to deal with it, almost like a challenge, the daily life disrupted in every detail, the care, the hospitals, the doctors.

Hands on my body. Diary of a cancer patient - Luciana Coen, The Meeting Point, 2008.

The Diary of a disease not "fought", but lived with almost as a journey inside a body, that changes and changes one's image of oneself, as a time of life in which to reflect and rebuild, as a path in awareness towards the acceptance of the disease as part of oneself. At the end of the path one's existence emerges redefined, within the limits that the disease and the cure impose, but with certainty and desire that life continues. A journey from the point of view of the ill person, in the same work environment in which she operates, observed with a critical eye, shiny and sometimes merciless, that reveals how important listening and believing the patient, respecting their decision-making autonomy to facilitate the process of healing. Writing becomes a way of reacting to the illness which suddenly alters their daily lives: the day after day rationality and emotional alternative, questions and attempts at answers take shape. A diary to rebuild their sense of existence and a gift for others, to testify that life, despite the disease, is still life, and still continues.

The last lesson. Life explained by a dying man - Randy Pausch, publisher Rizzoli 2008.

In August 2007, Professor Randy Pausch knew the cancer against which he fought was incurable and there remained only few months of life for him. He chose to leave his job at the university to be close to his wife Jai and their children. First, however, on 18 September 2007, in front of 400 students and colleagues he gave his "last lecture," entitled "Realising your childhood dreams." With irony, firmness and courage, he retraced the steps of his experience. His speech is a touching and profound testimony of a life made extraordinary by the intensity with which it was lived. Since that day, millions of people have seen on the

internet the last lesson of Randy Pausch. That text, expanded and enriched, became a book capable of reaching the heart of every individual. Pausch not want to reveal the meaning of life; but more modestly show why life is worth living.

The girl with 9 wigs - Sophie van der Stap, Publisher Bompiani 2008.

Amsterdam, 2005: Sophie is 21 years old when she is diagnosed with a rare and aggressive lung cancer. The treatment: a whole year of chemotherapy and radiotherapy. To cope with the situation, Sophie decides to keep a diary, in which she notes anxieties, fears, suffering even (or especially) small joys, like the warmth of family and friends. In particular, however, she decides to exploit the potential of wigs, objects that at first the disgust and frighten her, but that soon become indispensable allies. If hair loss has taken away her femininity, her personality, wigs will return it. Indeed, every wig has, in its own way, its own personality, and therefore its own name. Depending on how she felt or how she wanted to feel and look, Sophie chooses each time which wig to wear: "A Sophie insecure and fearful: Stella." "A sensual Sophie: Uma." "A smiling Sophie and wild: Sue." And so on ... Ready to have fun, to forget the disease. Ready to heal.

I won - Recovering from breast cancer, testimonies and interventions - Mauro Boldrini, Sabrina and Francesca Smerrieri Goffi, Giunti Demetra, 2009.

Thirteen women and just as many stories of lives marked by struggle, happily victorious against cancer. Evidence of deep humanity and commitment, of new awareness gained in dealing with the disease, the operations and the treatments required. On the other hand, it is sometimes equally difficult to negotiate how to deal with the disease and possible death. Everything literally, is put back into play with the appearance of a tumor which violates women at its deepest gender identity: the relationship with partner, family, children, work, and their religious beliefs. Housewife, teacher, athlete, sister, ballet dancer, career manager, the protagonists in these pages all with different aspects and, each time, a universe unfolds for us, touching a new experience, a thrilling victory over evil. Finally, the microphone passes hands across the table and we hear from five qualified specialists of Medical Oncology who tell us about each case, and carve in our memory themselves as professionals and as women.

I'm gonna take the chemo and return. Fighting cancer for 14 years with a smile - Paolo Crespi, Rizzoli, 2009.

Paul has just finished the seventh grade when, in summer 2008, while camping with friends, he realizes that something is wrong, his left knee is swollen. Once home exams show that it is the last thing he would have expected: osteosarcoma (a malignant bone tumour). One hundred cases a year in Italy. From that time everything changes: no basketball, no computer, and no outings with friends. Paul realizes that he has to show that he is OK, a bit 'of boldness; the courage to face the "bad luck" between commitments and distractions. A fight that he decides to narrate in a blog and then in this book. Fourteen rounds of chemotherapy, four surgeries, numerous examinations and rehabilitation treatments. The antidote to hospital life was playing around (the gambling dens with roommates, the skids in a wheelchair, and jokes of clowns). Fear, despair, and even pain can be overcome thanks to the affection of those around him and with his stubborn determination to regain normality. Paul returned to class after months of lessons at home, back on the basketball courts

cheering for his team, goes out with his friends for a pizza. The most powerful antidote, however, is the incredible desire not to be overwhelmed by the disease and never give up on your dreams: he wants to become a great chef and work on cruise ships.

Cancer does not scare me - Fabio Salvatore, Aliberti, 2009. Summer 1998.

Summer dreams, passion and love. Summer meetings. A few weeks. Time passes inexorably. Andrea, twenty years old finds himself in a hospital bed completely naked, there is a dark 'cockroach' inside him. Andrea has cancer. The "cockroach" deceives and destroys him, it wants to destroy his life, but Andrea breathes with courage and passion without turning off breath or soul. Andrea chooses the path of dialogue and understanding. Andrea does not trust cancer, He speaks, looks it straight in the eye and says, "I'm not afraid". Pages bursting with life, courage and passion. Pages crammed with memories. Pages of a story of hope. A life that fights cancer finding, a response in pain. Passionate, exciting words, at the same time painful and joyful, love and hate, trust and pride.

Fear does not exist - Fabio Salvatore, Aliberti, 2010.

Random Hearts, parallel lives marked by suffering, both physical psychological, but united by the desire for rebirth. There are trauma like illness and addiction to alcohol and psychotropic (drugs that are capable of affecting the mind), substances which decree the turning point in the troubled existence of the protagonists of "The fear does not exist ". Young men "marked", thanks to a disenchantment with life, are led to question themselves, to clash with a society which no longer shares their values, to find themselves and the will to live through a spiritual journey. During yet another cycle of therapy, Andrea runs into Emanuele. They meet in a hospital room, at a time of extreme fragility. Former DJ twenty-six year old Emanuele, has in fact, come to terms with his past. His drugs and alcohol abuse has destroyed his ability to react to the disease. In this case now is not the time for healing but for the discovery of friendship and faith. Thanks to brotherly kindness between the roommates, the two young people establish an incredible empathy and friendship that springs up with the passing years. Sharing pain and exchanging dramatic experiences proves cathartic: Emanuele not only regains his self-confidence, but like Andrea is able to defeat the "cockroach" and lighten the darkness of his soul.

Life is so - Jim Beaver, TEA, 2010.

"I love my Cecily, with all my heart ... Honestly, I think I can survive all the difficulties that this situation has put in front of me. What really throws me into turmoil and despair is to see her suffer and know that whatever the outcome, I have do not have the power to change her fate or to make it more acceptable". Jim Beaver and Cecily Adams are actors. They live and work in Hollywood. In August 2003 they receive news that is likely to upset their lives forever: their daughter Maddie, just two years, is suffering from a mild form autism. Just six weeks later, their world definitely collapses. Cecily has incurable lung cancer. After spending an entire day on the 'phone to family and friends, Jim decides that from now on, every night he will send an e-mail to keep everyone updated on the situation at the same time devoting his time to looking after his wife. In short Jim's e-mail becomes a fixture not only for his loved ones, but also for thousands of people around the world. "Life is so" continues for a full year, speaking not only of loss, but also the joy in taking care of a child,

amazement at being understood and supported by unknown people, the strength and the courage to start all over again.

I have cancer, I'm going to buy a lipstick - Kris Carr, Piemme, 2010.

Kris is 31 years old when she is diagnosed with cancer. She learned from the first moment the importance of dealing with the disease with the right attitude. Some of her advice is crazy, other advice inspired by common sense, others even "sexy", and all are needed to live in the best way possible a difficult overwhelming time.

Sometimes personal and intense, sometimes unconventional and even hilarious, a mix in the form of diary which collects thoughts and practical information, memories and suggestions. A story that manages to transcend the personal case to appeal to all those women who are going through a similar experience, and invites them to banish false modesty and harmful attitudes and instead continue to be themselves, to be women.

How I beat cancer without being Wonder Woman - Meredith Norton, Edizioni Piemme 2010.

Meredith thirty-five years old is in the prime of life. She has a job, a husband and a young son. She has an iron constitution, or almost, since the worst thing that she has ever suffered before is a bit of conjunctivitis from using eyeliner. But one day her world falls apart. Those symptoms that have been there for a while and doctors have underrate are due to breast cancer. It is at an advanced stage and there is only a 40% chance of survival. Thus began the exhausting, lengthy process of examinations, operations, treatments. But Meredith did it. She triumphs against all the odds. Thanks to the treatment, and in large part to her sense of humor, which helped in most difficult times.

I've lived through more than one farewell - David Servan-Schreiber, Ursula Gauthier Sperling & Kupfer publishers, 2011.

Physician and internationally renowned researcher, David Servan-Schreiber discovered at only thirty years old that he had a brain tumor with a poor prognosis, a few years of life. He decided not only to fight, but to tell his experience and his research in the book "Anticancer", which soon became a real method of treatment and prevention for hundreds of thousands of patients. But after nineteen years the cancer is back, and in an even more aggressive form. In these pages Servan-Schreiber poses crucial life questions, harrowing, and extraordinarily lucid. There is no defeat nor resignation in his words. Only the knowledge that in times like everything everything appears in a different light and it is necessary to take the reins of one's existence, with courage, never giving up hope, regaining a balance to one's life. He also raises the harder question does his anticancer method really work? The answer is yes and it gave him many more years – intense and rewarding years. In his reflection which gradually becomes his spiritual testament, Servan-Schreiber shows how even the extreme test of death can give more richness to life. As his natural resourcefulness which helped him cope with the disease can also help him to serenely face the end. As we would also do, what we give will remain forever in the heart and in the future of those who matter most to us.

Why me? How I won my fight for life - Melania Rizzoli published by Sperling & Kupfer, 2011.

When, in September 2001, she discovered she had an invasive, inoperable, aggressive, relapsing cancer of the blood Melania Rizzoli was only forty-two years old. Her doctor believed passionately and had a deep confidence in the progress of research and was also equipped with an innate optimism. So, after the failure of traditional therapies, he decided to take the road of stem cell transplantation, which now gives results unthinkable only twenty years ago. Melania is now cured and tells her story to all those who are still living with the terrible experience of cancer. Because hope never ends.

Suddenly one morning - John Bigatello, Marne Publishing House 2011.

"You have cancer; look YOU are ill with cancer." Whichever way it is put it is a cannon shot in the stomach, then maybe you reflect, then you react. Then, because at the moment the only reaction is to feel life slipping through your fingers, you say, "It is not possible". The author a geriatric doctor, tells in this book his personal experience as a cancer patient. His writing is testimony of a person who cannot be overcome by the disease, but the fights with all his love of life and looks on it with irony, and, despite being fully aware of what is happening, able to make the reader smile.

Once upon a time there was cancer. Stories of women who have fought with the disease and won- M. Rosaria De Luca, Danila Lostumbo, Armando Editore, 2012.

This volume contains fifteen photographs of women, black and white, taken by photographer Claudio Porcarelli. They are women who agreed to tell the story to journalists. They have in common a special feature: they have been ill with cancer and have been healed. They are women who have positively revolutionised their lives, becoming examples of strength and a source of hope for many others who are still following undergoing treatment.

Mummy, when will your hair re-grow? My experience with the breast cancer - Barbara Martinelli Köhler, Cartman, 2012.

How do you tell your kids of seven and four years that you have cancer, without troubling them and without taking away their carefreeness? What you tell them? "Children, you know one thing: I have an aggressive cancer." How can they understand? "But you are not going to die are you mummy?" the youngest one asked me, just as if it were a question like any other. How do you explain to them you'll have to go away for a while and that when you come back you will have to take a medicine that will make all your hair fall out? Barbara managed whilst fighting against the "dark evil", describing her road to recovery frankly, bluntly, sometimes even with humor, and with dignity and humility. She cannot help but want to continue to live for them.

Aloha, the breath of life! Not only cancer- Barbara Mariani, Etimpresa, 2012.

"Aloha" is one of the truest and human testimonies one could ever meet. Genuine and enveloping as the embrace of a mother. One starts reading expecting to be surrounded by the same heady, fresh and vivid atmosphere of the days of spring, when the first rays of sun warm the bones, sitting on a bench in a beautiful park full of happy children hopping

between balls, slides and swings. The book by Barbara is therapeutic. It is for everyone. Not only for those who are sick but for everyone because it responds to the profound need to rediscover themselves and in their own lives the authenticity of the concepts of health, welfare and living.

How I beat the cancer: a true story of Stephanie Butland - Newton Compton, 2012.

Is the moving story of the path through which the author managed to conquer cancer, using any type of practice; from meditation to treatments; without ever losing hope for a cure. From the moment that breast cancer was diagnosed, Stephanie was subjected to all the care available: drugs, chemotherapy, radiation therapy, surgery. Sometimes these methods have worked, others have failed, but the Stephanie has treasured every experience, has gathered in a diary thoughts, emotions, suggestions and posted in a blog to help other people who, like her, were fighting the same evil. From this testimony is born "How I beat the cancer," a book that offers advice not only to maintain a positive approach in respect of life, but to begin a path of acceptance of the disease and potential healing.

If you recognize it you can avoid it - Melania Rizzoli, Sperling & Kupfer publishers, 2012.

One can prevent cancer. Cures for cancer are becoming more and more frequent. This is the message of the book by Melania Rizzoli, to all those interested, to listen and recognize the alarm bells that our body sends us when something is wrong. In plain but precise language, the author gives us a general description of neoplastic disease, for each physical organ that can occur, shedding light on the symptoms, diagnosis and treatment to follow. After being a protagonist, both as patient and doctor, a successful battle against blood cancer - the story told in a previous book "Why to me?"- The author agrees with other evidence of cancer she lived, and for the most part overcome, by characters who have hesitated to make public their private drama. Because it is only by talking that one can stimulate preventative medical practice which is continually being neglected and instead is a powerful antidote to an illness that no longer has any reason to be called incurable.

I ... after. I teenager and my life with cancer - Lorenzo Spaggiari, The Scientific Thought in 2013.

The inner strength of a patient is always a treasure, but if his young patients, if that patient is only 15 or 20 years old its value is priceless. The stories gathered by Lorenzo Spaggiari in this book are not just stories of disease, but they represent a cross-section of extraordinary generation of kids that we are fortunate to have next to us at this time. They are well-informed people, who do not escape from an often cruel reality and the face it without cynicism. Each detail they tell is a lesson of life that they offer without pontificating. The common thread that unites Valerio Luca, Eugene, Michele, Mario, Alessandro and the others is the assertion of life as a value in itself and of the love for others, parents, friends, and other patients. "I ... after" is a book of love.

Films

Love story (1970) - directed by Arthur Hiller, with Ali MacGraw and Ryan O'Neal, is a love story ending with her death with leukemia.

The last snow of spring (1973) - was a great success and tells the story of a child, ill with leukemia, he has lost his mother, and fallen out with his father, eventually he dies in the arms of his dad.

A doctor, a man (1991) - directed by Randa Haines. William Hurt, tells the story of a successful surgeon, brilliant, unprejudiced and with little regard for others who is diagnosed with cancer of the larynx. By becoming a patient himself in need of care and having to undergo analysis that he discovers the doctors are annoying and the physicians arrogant. This opens his eyes on the values of human relationships that will guide him, once cured, to relate differently with his patients.

My Life, My Life (1993) - Bruce Joel Rubin, with Michael Keaton and Nicole Kidman, presents the story of a man who, on the eve of the birth of his son, discovers he has an advanced cancer and begins to record movies in which he tells of his life because he does not want to be just a vague memory to his child.

Enemy Friends (1998) - by Chris Columbus and starring Julia Roberts and Susan Sarandon, tells the story of two women who love the same man, the ex-wife (cancer patient) and his new partner, who put aside their differences for the sake of the two children of the first marriage.

For one summer (2000) - Mark Piznarski with Leelee Sobieski and Chris Klein, is a love story in which the protagonist is plagued by bone cancer.

Autumn in New York (2000) - directed by and starring Joan Chen, Richard Gere and Winona Ryder, narrated by Will Keane (Gere), who falls in love, perhaps for the first time, with the young and sensitive Charlotte (Ryder), who turns out to be seriously ill with neuroblastoma (a malignant tumour of embryonic nerve cells). Unfortunately, the fight to save her is unsuccessful.

Erin Brockovich (2000) - a film by Steven Soderbergh starring Julia Roberts, who plays Erin Brockovich, a secretary in a law firm that investigates a company suspected of having contaminated aquifers of small-town in America, causing tumors to residents which highlights the epidemiological aspect of the disease and its environmental causes.

Sweet November (2001) - directed by Pat O'Connor, with Keanu Reeves and Charlize Theron, in which a girl suffering from cancer, Sara (Theron), tries to enjoy life with the cynical Nelson (Reeves).

The Ultimate Dream (2001) - directed by Irwub Wubjker with Kevin Kline and Kristin Scott Thomas tells the story of a man who discovers he has cancer and is able to rebuild his relationship with his son and learns to socialise with others.

Strength of mind (2001) - written and directed by Mike Nichols, with Emma Thompson and Christopher Lloyd, Vivian, a teacher of English literature who is diagnosed with ovarian cancer, in particular with respect to the fact that doctors limit her care.

A Walk to Remember (2002) - A film by Adam Shankman and starring Mandy Moore and Shane West, about the love of two young people, he is reckless, she is quiet and religious. However she has cancer and he, transformed by love, will do everything to fulfill her wishes.

A time for dancing (2002), by Peter Gilbert, with Larisa Oleynik and Shiri Appleby, presents the story of a girl with an unbridled passion for dance. It turns out that she is ill and the story shows her fight against cancer.

My Life Without Me (2003) - by Isabel Coixet with Sarah Polley who plays a woman who is diagnosed with only a few weeks left to live. She decides not to say anything to anyone and to spend those weeks doing the things she had always wanted to do and there was never enough time.

One in two (2006) - by Eugenio Cappuccio, with Fabio Volo, tells the story of a lawyer who faints, undergoes tests and is diagnosed with brain cancer and the relationship that develops between him and a colleague.

It's never too late (2007) - by Rob Reiner and starring Jack Nicholson and Morgan Freeman is the story of two terminally ill patients who decide to escape from hospital to fulfil their last wishes and be able to rediscover themselves.

My Sister's Keeper (2009) - by Nick Cassavetes, with Cameron Diaz, Abigail Breslin and Sofia Vassilieva, narrates the struggle of two parents with a daughter with leukemia who do everything to save her, even having another daughter have a bone marrow transplant necessary for her to continue living.

Funny People (2009) - written and directed by Judd Apatow, with Adam Sandler and Seth Rogen, tells the story of a comedian who is found to have a form of leukemia. Eventually he is healed, but it is the path of his friendships and relationships with other comedians in the meantime which changes his life.

The First Beautiful Thing (2010) - by Paolo Virzi, with Micaela Ramazzotti, Valerio Mastandrea, Stefania Sandrelli, tells what happens, and the changes in the lives of people when a mother is terminally ill.

The last 56 hours (2010) - by Claudio Fragasso with Gianmarco Tognazzi which addresses the issue of so-called "Balkan syndrome" and speaks about the lymphomas caused by depleted uranium, of Italian soldiers who participated in the war in Kosovo.

The last song (2010) - by Julie Anne Robinson, with Miley Cyrus and Greg Kinnear, presents the difficult relationship between a divorced father and his daughter. A rapport that completely changes when she discovers her father is terminally ill with cancer.