

## Cancer and AAPIs

Cancer is the second leading cause of death in the US. In 2003, an estimated 1,334,100 people in the US are expected to be diagnosed with cancer, and 556,500 are expected to die from cancer. (American Cancer Society, 2003). One-half of new cancer cases occur in people aged 65 years and over. (US DHHS, 2000).

Between 1990 and 1996, the lung and bronchus, prostate, female breast, and colon and rectum were the most common cancer sites for all racial and ethnic populations in the US. Together, they accounted for approximately 54% of all newly diagnosed cancers. (US DHHS, 2000).

To many, cancer embodies the fear of pain, suffering, and death (Sontag, 1977). Prevention and early detection are key elements in control, but unlike other chronic diseases such as heart disease and diabetes, cancer evokes a fear that creates barriers to the utilization of health care services. Successful cancer prevention and treatment efforts must be tailored to address the distinct health beliefs and behaviors of different cultural groups.

Although the specific causes of most cancers are not well understood, **cancer is thought to be caused by three factors: environmental exposure, viral agents, and genetic predisposition.**

Environmental factors include lifestyle behaviors such as cigarette smoking and improper diet. Smoking has been linked to cancer of the lung, mouth, bladder, and other organs. Diets high in fat and low in fiber have been linked to cancer of the colon. Excess alcohol intake has been associated with cancer of the esophagus, tongue, and pharynx. (Metzlin, 1992).

Viral infections have been implicated in a growing number of cancers. The human papillomavirus is thought to play a causal role in the development of cancer of the cervix. Those who carry the hepatitis B virus have a greatly increased risk of liver cancer. *Helicobacter pylori* has been shown to be related to stomach cancer, and the Epstein-Barr virus is related to cancer of the nasopharynx. (Nomura et al., 1991).

The third cause, genetic predisposition, appears to account for only 2% of the cancer incidence. (Desmond, 1987).

### **Recommendation**

Help your clients modify their behavior to:

- Eliminate cigarette smoking
- Modify diet and alcohol intake
- Avoid exposure to other environmental or occupational carcinogens
- Prevent exposure to hepatitis B virus
- Undergo testing to detect early-stage cancer and maximize positive treatment outcomes
- Report symptoms of cancer for which there are no screening tests

(Jenkins and Kagawa-Singer, 1994).

## **Complementary and Alternative Medicine**

### *Traditional Chinese Medicine*

Traditional Chinese medicine (TCM) views cancer as a slowing or stoppage (stasis) in the flow of substances in the body. In particular, there are thought to be underlying factors that allow cancer to develop. For example, *qi* stasis, blood stasis, and phlegm are responsible for masses and abnormal cellular growth. These three types of stasis are thought to result from a variety of factors, including emotional disharmony (which causes stasis in the body), improper diet and exercise, and external pathogenic factors (which may remain in the body and cause stasis).

- **Qi stasis.** Responsible for distending pain, masses that seems to appear and disappear or change in size, and easy frustration, irritability, or other emotional reactions. The tongue is a dusky color, and the pulse is wiry.
- **Blood stasis.** Causes sharp, stabbing pain and masses that are fixed in origin. The tongue has distended sublingual veins, and the pulse is choppy.
- **Phlegm.** Leads to soft masses, a subjective sensation of heaviness or sluggishness in the body, and expectoration of copious amounts of phlegm. The tongue has a greasy coating, and the pulse is slippery or wiry.

TCM plays an auxiliary role in cancer treatment. It treats side effects of conventional therapies, controls pain, and helps keep the immune system strong. Although new drugs and approaches are being developed to overcome the side effects of cancer treatment, TCM may be a useful complement, focusing on specific symptoms.

### *Acupuncture*

Acupuncture is most effective in treating pain, fatigue, and nausea caused by oncology therapies. For **pain**, traditional points that have an analgesic effect are employed, along with acupuncture points that affect specific local areas or meridians. **Nausea** can be treated effectively with acupuncture needles, electrical stimulation, or massage. **Fatigue** can be treated with points such as Large Intestine 10 and Stomach 36. In all cases, a careful differential diagnosis should be undertaken. (Alternative Medicine, 2003a)

### *Herbal Medicine*

Herbal medicine, like acupuncture, treats symptoms based on a careful differential diagnosis. Specific herbal substances may be used for particular conditions, regardless of the overall energetic evaluation. For example, the herb *huang qi* (astragalus) in sufficient dosages may help prevent fatigue and raise the neutrophil count to allow chemotherapy to continue. Herbs such as cardamom seeds and fresh ginger are useful in preventing nausea. Herbs such as *ji xue teng* (caulis *ji xue teng*) have a potent effect in raising the white blood cell count. (Alternative Medicine, 2003b) A potential problem is that Chinese women may use herbal remedies when diagnosed with breast cancer. (ICC, 2001).

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*Qigong*

Qigong has repeatedly demonstrated its effectiveness in strengthening the immune system; fighting fatigue, depression, and the side effects of cancer treatments; and inducing a sense of well-being. Cancer patients undergoing treatment should be encouraged to participate in qigong exercises within their tolerance level, particularly in group practice sessions, to maintain a gentle exercise program and reduce stress and fatigue. (Alternative Medicine, 2003c)

## **References and Resources**

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