This is the twelfth newsletter in a series of ONCORG Community Conversations. They're focused on relationships between doctors and patients, and the complexity of treating cancer.

July 2026 – Early Edition: Your Loved One has Cancer – Now what!

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Mr. Thomas is a military veteran who served eight years in the USAF. He also spent eleven years in the automotive industry, ten years in healthcare and eight years with Apple Inc. supporting customer needs.

Two decades ago, my mother had cancer and her sisters rallied around her to make sure she had all the care she needed. Even though I was an adult, I really did not fully understand the details behind her survivorship. There was even some bickering and differing of opinions among the sisters. I had no idea how to intervene other than to 'go with the flow' and hope for the best. She eventually passed after struggling for about six months. Now that I know what I know, I can share some practical advice for how best to support your loved ones during their survivorship.

When a loved one has cancer, your primary responsibilities include being a medical advocate, a household manager, an emotional anchor, and a good administrator. And being attentive to their personal care.

As a **Medical Advocate**, be prepared to manage medical appointments, including transportation, tracking medications, understanding the purpose of each doctor visit and medication. You are an extra set of eyes and ears, and communicate with the care team when appropriate. Keep a nice binder with tabs to record activities. Or do what I'd do, which is to record everything digitally.

Your responsibilities will involve **Household Management** chores such as cooking, cleaning, laundry and pet care. These very important tasks make a big difference in their survivorship journey because it relieves stress.

Cancer survivorship is very stressful and your **Emotional Support** is necessary. I remember during my cancer survivorship I experienced a complex mix of emotions such as a fear of recurrence, anxiety during my follow-up PET Scans and MRI's, and dealing with questions such as 'why me? I never smoked, and I have throat cancer. Really?

I had a couple of close friends who listened carefully about my concerns, and I have given emotional support for others. They need it and we have to learn to be a careful and understanding listener, without judgement. Remember, you can't fix anything, but you can ask questions pertaining to how you can help, such as 'can you fix a meal, or run an errand?

Helping your family member is stressful, and it's important to take care of your own-self physically and mentally, or you'll 'burn-out.' Remind yourself, you can't do everything on your own. Give yourself permission to ask for help.

A Bit of Caution

Cancer medical information can be confusing, Some of the reasons could be the information if difficult to understand or the doctor does not explain the information properly, or the patient is so tired they don't ask proper follow-up questions. Sometimes the patient or advocate don't know good follow-up questions and that's understandable. This could lead to emotional overload or misinformation.

These discrepancies can lead to varied understandings of the survivor's prognosis, physical limitations, and risk of recurrence.

But there are other underlying reasons why your survivor's information is misleading. My mother hid her cancer details from me for many months. I was angry, but who am I to question her desire for selectively **sharing her privacy informa**tion. She shared her details with her favorite sister Marion who eventually told me all the details.

Sometimes a primary caregiver or 'family health provider' selectively or misinforms the other family members. Some information can easily become distorted, misunderstood, or colored by that relative's own emotional state before it reaches siblings or extended family members. I experienced this, and when the truth bubbled to the top, family members quibbled with each other. It was messy.

With all of that, family members may unconsciously focus only on optimistic updates to avoid the anxiety of a potential relapse, filtering out the survivor's ongoing struggles. I did some of that.

In closing, when managing your family member's survivorship, listen carefully, do your homework, avoid criticism or judgement and remember you're human with limitations. And you cannot change the inevitable.

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