Scars of Survivorship

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et me show you my scar," the twentysomething woman said to her fellow cancer survivor friend, as she pulled the top of her v-neck shirt diagonally to show the scar where her Hickman catheter had been.

"This is where I had my PICC line," the other survivor said, straightening her arm to show the remnant of a former IV site. And their conversation went on. They were engrossed in each other's cancer survivor stories.

Cancer survivorship deals with living the scars of the cancer life experience. They might be physical, such as a disfig-

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urement from brain surgery, an amputation, a colostomy bag, or, like mine, a four-inch scar from a golf ball-sized lump (non-Hodgkin lymphoma) removed from my left groin. Wherever they are, there is no doubt the cancer battlefield has left scars, inside and out.

The turmoil of what remains, or memories of what it was like, are still easily retrievable and a necessary component to talk about in cancer survivorship. The emotional scars could be depression, feeling alone, an inability to relate to noncancer survivor peers, or altered concepts in identity. Sharing the issues related to cancer survivorship with peers who are dealing with similar issues is a benefit. In Lester (2014), the author writes: "Oncology care providers are accustomed to providing expert care, but the establishment of cancer survivorship care as a distinct phase remains a relatively new concept to most healthcare providers" (p. E35).

Having been an oncology nurse, I am experienced in taking care of patients. I drew labs, changed Hickman catheter dressings, and hung multitudes of IV medications and chemotherapy. Living the life of a patient with cancer, I was able to experience the many layers involved in dealing with cancer. I craved the camaraderie and kinship of others who were walking or had walked the journey I was now on. They offered me their insight and a listening ear. As a survivor, I have

had the privilege of mentoring many patients with cancer. I have experienced the therapeutic connection in sharing my survivor story with them while listening to their struggles throughout the cancer roller coaster ride. The verbal purging of

emotions is beneficial for those who are presently in the battle and for those who have already lived it. There is a unique sense of bonding when you know someone can speak the language of the cancer journey from experience: "It's one thing knowing you have people cheering you on, yet another to know they've walked in your footsteps" (Magnus Moore, 2014).

Possibly our thought in follow-up care should not only be what issues cancer

survivors are dealing with now, but what they would like to share about their cancer experience and how.

Maybe our questions as healthcare professionals talking with survivors should be, "What statement do they want to make and how do they want to make it?" and, "How do we help them share their story?" Talking to others (support group), one-on-one peer support, written expression (blogging, journaling), praying for others, creating a video game about cancer survivorship, running a marathon, and raising funds for research are possible examples.

Patients with cancer have been vulnerable to not only physical frailty of trauma and suffering on their bodies, but also insult to their whole being: emotional, spiritual, and mental. The scars of survivorship are many. Perhaps survivorship care should not only focus on how to conquer cancer, but also should offer survivors help in expressing what they have conquered.

References

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