



Sara Whitlock

LUNG CANCER

“I lost my job, my hair, and perhaps worst of all, my ability to be much of what I thought defined me as a person—my ability to be a wife to my husband or a mother to my children.”

In October 2010, I was diagnosed with Stage 4 Lung Cancer.

We sat with the medical and radiation oncologists as they laid out the extent of my disease and our treatment options. I'm not sure how much I really heard during those first days. I mostly remember the drawing my radiation oncologist did with all the areas of cancer represented by red circles all through my chest. I remember telling my children. I can recall my family and friends' stricken faces when we told them the news. I also remember lying in bed in the early morning hours, and how my husband and I clutched each other and wept.

My family traveled to our home that first weekend and gathered around me, laid their hands on me and on one another, and we prayed for wisdom and for healing. I remember feeling my little brother's arms shake as he prayed for me and how his tears splashed onto my face and joined my own.

We decided to ignore the dismal statistics, and my team at the Wright-Patterson Air Force Base Medical Center and the Cleveland Clinic developed a very aggressive treatment approach. I began chemo on my 15th wedding anniversary. I lost my job, my hair, and perhaps worst of all, my ability to be much of what I thought defined me as a person—my ability to be a wife to my husband or a mother to my children. I went from running three miles several times a week to being unable to walk up a short flight of stairs.

We followed six cycles of chemo with six weeks of radiation to my chest. When a node in my abdomen seemed resistant to treatment, a biopsy revealed that it was the same cancer as in my lungs. We decided to start treatment with Alimta every 21 days, and the results of my PET scan showed no uptake anywhere, and the decision

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Treatments for lung cancer include surgery, chemotherapy, radiation therapy, and targeted drug therapy. Tests for lung cancer include:

- Chest x-ray to identify “spots” that could be cancerous.
- Chest CT scan to identify and further characterize “spots” that could be cancerous.
- Positron emission tomography (PET) scan to characterize the metabolic activity of “spots” and to identify potentially cancerous cells in lymph nodes and other tissues.
- Sputum (or mucus from your lungs) tests to check for cancer cells.
- Bronchoscopy to obtain lower respiratory specimens to check for cancer cells in the lung(s).
- Lung biopsy to check for cancer cells in the lung(s).
- Thoracentesis (sampling fluid from the pleural space around the lung) to check for cancer cells in the space around the lung(s).

Learn more: ATS Patient Education Series. “What is Lung Cancer?” New York, NY. 2008. patients.thoracic.org

was made to radiate my abdomen for good measure. We continued the Alimta, and I scheduled another PET scan.

I remember the anxiety waiting for my oncologist to call with the results. I sat on the couch and planned my funeral. I couldn't help my mind from going in those dark places. And ten minutes later, the phone rang.

“Hello?”

“You remain in complete remission.”

“WHAT?!”

“I said that you remain in complete remission.”

At that point, words fail me. The tears start. “We'll talk more later,” he says gently, and hangs up.

My husband walks in and I fall into his arms with relief. He holds me up—like he always does—and we are so thankful. Later, we have our Lenten devotional, and my husband says a prayer that we will remember every day the miracle that has taken place in our own house.

So far, I've tested negative for all the genetic mutations discovered. But I am confident that your hard work will result in more discoveries and more treatment options for me. More time with my family. More time with my friends. More time—those are such sweet words.

Sara Whitlock was a patient speaker at the ATS 2012 International Conference in San Francisco.