

# Grateful: Eudy shares her breast cancer journey



**Ring the bell** – Beth Eudy rings a Lake Regional Cancer Center bell after her last radiation treatment. “At least 10 nurses from chemotherapy and radiology were there, cheering me on,” she said.



**Beth Eudy**

**B**eth Eudy never would have made it to Portugal had it not been for breast cancer. She looked out at the ocean, and she felt grateful. “Cancer came along, and it taught me: ‘Hey, you have this opportunity to go. Take it,’” she said. “I stood on the beach in Portugal, and I thought back to when I was so sick, and I was glad I didn’t give up.”

her with a video and tributes. “That fueled my soul,” she said. Another surprising source of strength was her relationships with her care team at Lake Regional Cancer Center. The nurses and doctors helped her get through hard times with exceptional care, and they helped her celebrate good times with smiles and fun. “After my last chemo treat-

well. She retired early from

**No time to waste**  
Eudy was 51 years old and an English teacher at Eldon High School when she was diagnosed with breast cancer. On July 5, 2021, she noticed her left breast looked a little misshapen. Then she felt the small, hard lump. Within a week, Lake Regional OB-GYN Amy Thompson, M.D., FACOG, had scheduled an ultrasound, a biopsy and an appointment with a Lake Regional general surgeon. “It was scary at first because I was like, ‘Whoa, this is moving fast,’” said Eudy, who does not have breast cancer in her family. “Then it helped me feel calm because I knew that things were being taken care of and I didn’t have to do it, that Dr. Thompson cared enough to have it all set up.”



**What’s a little mountain?** Beth Eudy stands at the top of Pike’s Peak one year to the day after her first chemo treatment. Driving up, she and her friend got a little nervous “because it’s quite a scary drive,” Eudy said. “And I looked at her and said: ‘I’m not going to let this mountain stop us. I beat cancer. Let’s go.’”

**All the emotions**  
The biopsy revealed Eudy had stage 1 invasive ductal carcinoma, ER-positive and PR-positive. That meant the hormones estrogen and progesterone helped feed the cancer. Treatment began with a lumpectomy, performed by Lake Regional General Surgeon Justin Shatto, M.D. Next came chemotherapy, followed by radiation therapy. Early on, Eudy learned she needed to be real about how she felt. Journaling helped. So did talking to people who had fought cancer, “any cancer,” she said. “The changes in one’s mind and body are frightening, so talking with someone who has gone through the same battle helps to normalize things a bit,” she said. For many women, one of the hardest parts of cancer treatment is losing their hair. Eudy, who had always wanted super short hair, found it freeing. “I was afraid of what people would think,” she said. “Once my hair fell out, I didn’t care anymore. I was bald, and I wasn’t embarrassed. I knew then — cancer is teaching me something.”



**Whatever is needed** – Beth Eudy stands with Cancer Center nurses Maria Pobst, R.N.; Gail Cape, R.N.; and Kerri Roettgen, R.N. “I always knew I could call someone from the Cancer Center, and they would talk me through whatever I needed to do,” Eudy said.

**Team effort**  
One night she will always remember is the Pink Out volleyball game that Eldon High School held in 2021. Along with selling T-shirts and raising money to help cover her medical costs, the students and staff surprised

ment when I was going to ring the bell, I told my nurse, ‘OK, Kerri, look up “Ring My Bell” by Anita Ward,’ and she looked it up, and she sang, and we all danced over to the bell,” Eudy said. Even now, Eudy looks forward to seeing everyone at her checkups. “It’s like coming back home for a minute, which is really odd, but what a blessing to feel that way,” she said.

teaching but now works as a substitute teacher and at other part-time jobs. She feels closer than ever to her parents. And she’s learned it’s OK to treat herself to a massage now and then, to enjoy a nice meal with friends, and, when the opportunity presents itself, to take a trip to London and Portugal. “Cancer gave me a courage that I didn’t know I had,” she said. “It gave me the confidence to just be, and if you can get to that point, it’s pretty amazing.”

**Finding courage**  
More than two years since her diagnosis, Eudy is doing



**Pink Out Night** – The Eldon community rallied around Beth Eudy, honoring her at a Pink Out volleyball game in October 2021.

**We’ll leave no stone unturned on your cancer journey.**

It’s an honor to be a nationally accredited Cancer Center, serving our neighbors across the region. We’re proud to provide a team of cancer specialists who go above and beyond for our patients, with state-of-the-art technology, advanced treatments and personalized care.

**SEE BETH’S STORY: LAKEREGIONAL.COM/CANCER**

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## Ways to manage cancer-related fatigue

It's the most common side effect of cancer treatment: fatigue. The exhaustion can be overwhelming and unpredictable, making it difficult to do everything from clean the house to lift a fork at dinner.

“Lack of sleep isn't usually the problem, which means sleeping more won't help,” said Carla Ostronic, MPAS, PA-C, who cares for patients at Lake Regional Cancer Center. “Sometimes there's a medical solution — for example, if treatment is causing anemia, then medication or a blood transfusion may help. So be sure to tell your care team how you are feeling.”

Whatever is behind the fatigue, good self-care is critical. Here are five tips for managing cancer-related fatigue:

**Prioritize.** If you have limited energy, plan to spend it on the activities most important to you. “Is there a

time of day when you tend to feel the best?” Ostronic asked. “If possible, use that time to get things done that will make you feel like the day had meaning — whether that's completing a necessary task or connecting with a friend. Use that time differently on different days for variety and balance.”

**Take lots of breaks.** “Pay attention to your body,” Ostronic said. “If you're tired, rest.”

**Delegate.** When people ask how they can help, tell them. “You're not going to be able to do everything you're used to doing,” Ostronic said. “Your main focus should be on healing, so you have to work within the limitations and learn to adapt.”

**Move around.** It may sound counterproductive, but

physical activity can be energizing. “We're not talking about strenuous exercise,” Ostronic said. “Try a walk outside or 30 minutes of yoga for an energy boost.”

**Socialize.** Although you might not feel like socializing while going through treatment, social interaction is vital. And, talking with other people in your situation is particularly helpful. “Consider joining a support group,” Ostronic said. “Lake Regional Cancer Center offers groups for men and for women. Patients leave feeling uplifted, and many also feel stronger. It's powerful to connect with others on similar journeys.”

**Get support here**  
Lake Regional's Women's Cancer Support Group meets at 1 p.m. the first Tuesday of each month, and Lake Re-

## Breast tests defined

Most women are familiar with mammography, but what about other tests used to diagnose and stage breast cancer? Do you know what they do, what to expect and why they're used?

“Each test has its own benefits and limitations,” said Michael Vierra, M.D., a Lake Regional radiologist. “That's why we often use them in some combination to help us put together a larger picture of what's going on inside the breast.”

Following is what you need to know about four common breast tests.

**Mammogram.** This X-ray test is what most women get when they go in for a breast cancer screening. Each breast is placed between two X-ray plates, and images are taken from two views — from the top and side. Doctors use the images to look for changes in breast tissue, which is why it's important for women to go yearly. If a change is detected, you may be asked to come back for a diagnostic mammogram. The process is the same, but more images are taken so doctors can get a closer look at any abnormalities.

**Ultrasound.** This test uses sound waves to create a picture of breast tissue, just like an ultrasound used to examine a baby in utero. A technician rolls an ultrasound wand over the area being studied to produce an image. Ultrasound is often used to diagnose breast changes that can be felt but not seen on mammography. It also can help doctors distinguish between fluid-filled cysts and solid masses.

**MRI.** This test uses very strong magnets to create detailed, cross-sectional images of the breasts. It is very good for identifying small nodules that may not appear on mammography. Breast



Michael Vierra M.D.

MRI is recommended for women with dense breast tissue because it allows doctors a better view. But because it's so precise, breast MRI also picks up changes that many times are not cancer (false positives). That's why it's not more widely used in routine screening. The test requires patients to lie still on a table as the MRI machine takes multiple images. When used to diagnose breast cancer, a contrast dye is introduced intravenously before the scan to illuminate potentially cancerous areas on the images.

**Biopsy.** When cancer is suspected from the results of an imaging test, a sample is collected for testing through a procedure called a biopsy. Removing and testing a sample of cells is the only way to confidently diagnose breast cancer because many nodules turn out to be benign, or harmless. There are several types of biopsies, and which one your doctor uses depends on how likely the mass is to be cancerous, how large the tumor is and where it is in the breast. Many biopsies can be performed with only a needle. Others require either minimally invasive or open surgeries.



Carla Ostronic MPAS, PA-C

gional's Men's Cancer Support Group meets at 1 p.m. the second Tuesday of each month.

Both groups meet at Lake Regional Hospital in Conference Room D (near cafeteria). Registration is requested at lakeregional.com/Events.

## BY STAGE:

# Breast cancer treatment options

There's no one-size-fits-all approach to breast cancer treatment.

“Every patient requires a personalized treatment plan,” said Shahid Waheed, M.D., FACP, an oncologist and hematologist with Lake Regional Cancer Center. “Much of that plan will depend on the stage of the cancer at the time of diagnosis.”

Following are the treatments commonly used at each stage. Each case is different, though, and treatment plans

vary by patient.

**Stage 0 (ductal carcinoma in situ, or DCIS):** Sometimes referred to as precancerous, DCIS is characterized by abnormal cells that are confined to the breast milk ducts. Surgery is typically the treatment.

**Stage I (early breast cancer):** These cancers are smaller than 2 centimeters and have not spread to the lymph nodes. Again, surgery is often the only necessary treatment.

**Stage II (early breast cancer):** This stage describes cancers that are larger than 2 centimeters or have moved to a few nearby lymph nodes. Treatment involves a combination of surgery and radiation or chemotherapy. Hormone therapy also may be used for patients with hormone-receptor-positive cancer.

**Stage III (locally advanced):** These cancers have spread outside the breast to the chest wall or breast skin or to many lymph nodes but not to other organs. Treatment includes a combination of surgery, radiation and chemotherapy. Hormone therapy or targeted therapy (medication directed at only abnormal cells), also may be used.

**Stage IV (metastatic):** In this stage, the cancer has spread beyond the breast to other parts of the body. Stage IV breast cancer is treatable, but not curable. Chemotherapy or radiation may be used to slow the cancer's growth and ease symptoms. Hor-



Shahid Waheed M.D., FACP

mone therapy also may be used.

As you can see, treatment gets more complex with each stage of cancer. That's why Dr. Waheed encourages women to keep up with routine mammograms.

“The earlier you catch breast cancer, the easier treatment will be,” he said. “Make screening a priority.”

### Worried about screening costs?

Show Me Healthy Women is Missouri's implementation of the National Breast and Cervical Cancer Early Detection Program. The program provides free breast and cervical cancer screenings throughout Missouri, for women meeting certain guidelines:

- Income at or below 200 percent of the federal poverty level for household income and
- Age 35 to 64, or older if they do not receive Medicare Part B and
- No insurance to cover program services.

For more information, contact Lake Regional Obstetrics and Gynecology at (573) 302-2764.

## Eight tips for your first mammogram

Are you excited for your first mammogram? Yeah, we didn't think so. But there's no need to dread it, either.

“There's very little preparation required, but we have a few tips to make mammograms easier,” said Lake Regional Radiologist Baron Adkins, D.O. “And knowing exactly what to expect will ease your mind, too.”

Follow these tips for surviving your first mammogram so you're more likely to stick with them every year.

1. Schedule strategically. Women report varying levels of mammogram discomfort, and it largely depends on breast size and tenderness. Schedule your mammogram for when your breasts are the least tender, usually the week following your period.

2. Be prepared with personal health information. On the day of your mammogram, you'll be asked about your

family history of breast cancer and your personal history of cancer and hormone use, including birth control. To make it easier, you may want to jot down some notes to take with you.

3. Take an ibuprofen. The mammogram itself may be uncomfortable or painful, but it lasts only about 15 seconds per view, with four views being standard. Taking an ibuprofen helps alleviate the residual soreness that may last about a half hour after.

4. Don't wear a dress. You'll be asked to remove your shirt and bra, but you can keep your pants or skirt on.

5. Reward yourself. Getting a mammogram is a great step to take for your health. Take yourself to a movie or plan a lunch date with a friend for after the exam to make the day more enjoyable.

6. Don't worry if you get a

callback. Getting a callback isn't uncommon, especially after your first mammogram because the radiologist has no prior image to use for comparison.

Most callbacks can be attributed to folds in breast tissue and calcifications — not cancer. In fact, 90 percent of women who get called back for additional screening do not have cancer.

7. Set a reminder to schedule your next one. Whether you schedule around your birthday or another annual event, put a reminder in your phone to schedule next year's screening. “You want to continue getting mammograms annually to ensure nothing gets missed,” Dr. Adkins said. “The longer you go between mammograms, the longer a breast cancer can grow. Being proactive gives us the best chance to catch the cancer early.”



Dr. Baron Adkins, D.O.

### First mammo? Check!

Lake Regional Imaging Center is making it easy for women to check that first mammogram off their list with appointments at the Women's Health Fair Saturday, Nov. 4.

Learn more and register now at lakeregional.com/FirstMammo.

## STAY ALERT:

# The warning signs of breast cancer

Ask a woman to name a sign or symptom of breast cancer, and chances are she'd say a lump in the breast.

She'd be right, of course. A new lump or mass is the most common symptom of breast cancer. But it's not the only one.

“Breast cancer can cause various changes, including changes in breast appearance,” said Katrina Lock, FNP-BC, WCC, from Lake Regional Cancer Center. “Women need to know all of the signs so they know when to seek medical attention.”

If you notice any of the following signs or symptoms in a breast, see a doctor right away.

- A lump in the breast or armpit.
- Thickening or swelling of all or part of a breast — or sometimes in the armpit or collarbone area — even if you can't feel a lump.
- Irritated or dimpled breast skin.
- Redness or flaky skin in the nipple area of the breast.
- A nipple that points inward.
- An indented spot on the breast.
- Breast or nipple pain.
- Nipple discharge, which may be bloody or clear.
- Any change in the size or shape of the breast.

Any of these signs and symptoms, including lumps, can be caused by things other than cancer. But only your



Katrina Lock FNP-BC, WCC

health care provider can tell for sure.

### What happens next?

If you have a lump or breast change, your doctor will examine your breasts. He or she may also order tests to take a closer look. These may include a mammogram, breast MRI or breast ultrasound. You also may need a biopsy, which checks a sample of breast tissue for cancer.

It's important to remember that breast changes are very common, and most are not cancer.

“If you notice something, seek help,” Lock said. “If it's nothing, you no longer have to worry about it. And if it needs attention, you've taken the first step.”

Sources: American Cancer Society; National Cancer Institute

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At Lake Regional Cancer Center, patients find a team committed to helping them throughout their cancer journey.

"Every day, our team provides comprehensive cancer to help prevent, diagnose and treat cancer," said T.J. Sweet, cancer service line director at Lake Regional.

National accreditation Lake Regional Cancer Center has earned national accreditation from the American College of Surgeons Commission on Cancer.

Meet our cancer treatment team When you come to the Cancer Center for treatment, you'll work with a team of professionals, including: Physicians specializing in medical and radiation oncology, Nurses certified in oncology and palliative care, Surgeons

- Pathologists
Radiologists
Experts in pulmonology, urology, gastroenterology, ENT, gynecology and more
Registered dietitians
Social workers
Our multidisciplinary team works together to provide the medical expertise you need, right here, close to home," Sweet said.

Physician consultation Lake Regional Cancer Center recognizes that the process of cancer diagnosis and staging can be frightening and confusing for patients and their loved ones.

Surgical services Surgery is often part of the care plan, and most Lake Regional Cancer Center patients can have their surgeries done at Lake Regional - whether the surgery is for cancer diagnosis, staging or treatment.

Diagnostic imaging Lake Regional Imaging Center offers expert care paired with the latest technology to diagnose cancer at its earliest stages.

ogy to diagnose cancer at its earliest stages. Services include:

- 3-D mammography
Breast MRI
Ultrasound-guided biopsy
Computerized tomography (CT) scans
Magnetic resonance imaging (MRI)

Tests are read on-site by board-certified radiologists. These experts are part of the Lake Regional multidisciplinary care team that guides testing and evaluation to create a comprehensive treatment plan.

Chemotherapy

Lake Regional Cancer Center offers a range of infusion and chemotherapy services. The center's chemotherapy area includes 10 private treatment areas, each equipped with a television and wireless internet.

"We understand the importance of patients having open communication and trusting relationships with their health care team," Sweet said.

Radiation Therapy

Lake Regional Cancer Center provides radiation therapy treatment, including intensity modulated radiation therapy (IMRT). Lake Regional has one of the most advanced oncology systems available, featuring a linear accelerator equipped with the latest in software options.

Social workers



Lake Regional's social workers ensure each patient and family receives needed assistance to cope with the effects of cancer. This support includes assistance with financial needs, as well as resources to help patients manage stress and adjust to life with cancer.

The center also offers wigs, travel assistance and support programs.

Nurse navigators

Lake Regional nurse navigators serve as the go-to person for patients and make sure they stay on the right path from diagnosis to treatment to survivorship.

"At Lake Regional, we're with you in every way during each step in the battle against cancer," Sweet said.

Support groups

Lake Regional Cancer Center invites all cancer patients to monthly support groups, one for men and one for women. Participants learn about symptoms to expect during treatment; tips and tricks for managing those symptoms; and how to maintain a positive mindset during and after treatment.

Palliative care

Palliative care services are available for patients with serious, progressive or life-altering illnesses. The palliative care staff support patients and their families as they cope with the physical, emotional, social and spiritual effects related to their illness.

Nutrition services

Proper nutrition plays an important role in the care and healing of individuals diagnosed with cancer. To help patients meet nutritional goals, expert dietitians partner with the Lake Regional Cancer Center health care team to support patients throughout their cancer treatment and recovery.

Lymphedema therapy

Radiation therapy or the removal of lymph nodes during cancer treatment can damage the body's lymphatic system, leading to a type of swelling called lymphedema. With early intervention and proper treatment from Lake Regional certified lymphatic therapists, lymphedema's effects can be diminished, enabling patients to lead full lives.

Learn more about Lake Regional Cancer Center and cancer treatments at lakeregional.com/CancerCare.

Clinical research

Lake Regional Cancer Center patients have the opportunity to enroll in clinical research studies right here at Lake Regional.

"We bring the latest diagnostic tools and treatment options right to our patients, so they have more options for their health care and spend less time traveling for these resources," said Kathy Hirst, ACRP-CP, director of Lake Regional Clinical Research.

Learn more at lakeregional.com/ClinicalResearch.

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A girl, a calf and a judge - Brooklyn Wieberg, 4, visits with judge Kelly Stumpe from Russia, while during Monday's bucket calf show at the Miller County Fair in Eldon.

Iberia board raises pay, eyes projects

After considering information from a recent workshop meeting and employee groups and Superintendent Lyndel White, the Iberia R-V School Board adopted the district's 2023-24 budget Tuesday. Some repair work will be done before school starts, White said. The board set the base pay for teachers at \$92,700 and will allow all staff to receive their step increases on their salary schedules. The base pay for a first year teacher with a bachelor's degree, steps including hardware will be replaced last where done and replaced with new ones, they will have small plan rates and smaller sickdays to enhance security. The board considered requesting just the worst doors be replaced in the end of the year. The board did accept a \$40,000 bid for replacement of a number of entry doors, some of which have become difficult to impossible to lock. In some instances only the locking hardware will be replaced last where done and replaced with new ones, they will have small plan rates and smaller sickdays to enhance security. The board considered requesting just the worst doors be replaced in the end of the year. The board did accept a \$40,000 bid for replacement of a number of entry doors, some of which have become difficult to impossible to lock. In some instances only the locking hardware will be replaced last where done and replaced with new ones, they will have small plan rates and smaller sickdays to enhance security. The board considered requesting just the worst doors be replaced in the end of the year. The board did accept a \$40,000 bid for replacement of a number of entry doors, some of which have become difficult to impossible to lock. In some instances only the locking hardware will be replaced last where done and replaced with new ones, they will have small plan rates and smaller sickdays to enhance security.

St. Elizabeth board approves preliminary budget

Wednesday, June 28 the St. Elizabeth R-V Board approved the 2023-2024 budget. Superintendent Doug Kemper said in the budget summary "the budget for the upcoming year is projected at \$21,192,173. The 2023-2024 operating levy estimate is \$3.99 per \$100 of assessed value. The beginning balance (July 1, 2023) was \$1,522 million with proposed revenues of \$3,200 million and projected expenditures of \$3,196 million. The projected ending fund balance on July 1, 2024 is \$1.53 million. The projected fund balance percentage at the end of the 2023-2024 school year is 38.4 percent. Kemper said classroom revenue: Kemper said local property tax assessments are completed and the old ceiling has been replaced. "Our 2023-2024 school year rate will remain at \$3.99. The voter-approved rate passed Aug. 5, 2014.

Trading time this Saturday in Tuscumbia

It's trading time in Tuscumbia Saturday, July 8 at River-side Park in Tuscumbia. The event is from 9 a.m. to 2:00 p.m. with a variety of vendors present to sell, better or trade their goods. Items will include plants, flowers, fresh eggs, baked goods and more. For more information or to become a vendor, contact Kristina Ash at (203) 280-9978 or message T-Town Trading on Facebook. The event will be held rain or shine.

Miller County Fair Schedule

Table with columns for date, time, and event details for Wednesday, July 5; Thursday, July 6; Friday, July 7; and Saturday, July 8.

2023 Theme - "Barnyard Bash"

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# Join Lake Regional, fight cancer with **Pinktober** events, fund-raisers

October is Breast Cancer Awareness month. Celebrate survivorship, learn about cancer prevention and support local care with Lake Regional Health System’s Pinktober activities.

“Your engagement will raise awareness, encourage those in the fight and support our mission to continue providing exceptional cancer care right here at the lake,” said T.J. Sweet, director of Lake Regional Cancer Center. “Let’s come together to fight cancer this Pinktober.”

### Pinktober flags and signs

Show your support for breast cancer patients by purchasing “Fight Cancer” feather flags and yard signs. The tall feather flags are \$250 each, and the yard signs are \$50 each. All proceeds benefit Lake Regional Health System. Order flags at lakeregional.com/Pinktober.

### Wear Pink Wednesdays Oct. 4, 11, 18, 25

Lake Regional team members invite the community to join them for Wear Pink Wednesdays. To purchase

the official Lake Regional “I Can Fight Cancer” T-shirt for \$20, visit lakeregional.com/Pinktober. All proceeds benefit Lake Regional Health System.

### Pink-Out party at The Encore

6 p.m. Saturday, Oct. 21, The Encore Lakeside Grill & Sky Bar, 3076 Bagnell Dam Blvd, Lake Ozark

Lake Regional invites the community to come celebrate survivorship! The evening will include:

- Auction items
- Live music by Madd Hoss Jackson from 7:30-11:30 p.m.
- Live painting by local artist Garrett Sixone Jaxson
- A Pink-Out Contest. The best-dressed couple in pink wins a two-night stay and a \$200 gift card for The Encore!

Tickets are \$20, and premium seating is available. Partygoers also may sponsor a table. For tickets or table sponsorships, call (573) 348-8222 or visit lakeregional.com/DonateNow (select table option at bottom of form). All proceeds benefit

Lake Regional Health System, which provides local cancer care.

### Women’s health fair

9 a.m. to 12 p.m. Saturday, Nov. 4, Lake Regional Imaging Center, 1075 Nichols Road

Calling all women! Here’s a chance to take action for your health. Join us at the Women’s Health Fair to:

- Receive free information from Lake Regional experts on osteoporosis, skin cancer, breast cancer, colorectal cancer, menopause, nutrition, exercise, incontinence and more. Experts will include Teresa Buol, FNP-C, from Urology; Carla Ostronic, MPAS, PA-C, from the Cancer Center; and OB-GYN providers Katie Helton, MSN, APRN, FNP-C; April Miller, MSN, APRN, FNP-C, and Tilly Schmidt, DNP, APRN, WHNP-BC, CPC.

- Learn whether you’re a candidate for genetic testing
- Receive free screenings for blood pressure and BMI
- Get your flu shot from Lake Regional Pharmacy (self-pay or bring insurance card)

No registration needed for this come-and-go event. The first 100 attendees will receive a free pink cosmetic bag filled with goodies!

### Get your first mammogram

Saturday, Nov. 4, Lake Regional Imaging Center, 1075 Nichols Road Are you ready to check that first mammogram off your list? Lake Regional is making it easy with this special scheduling opportunity just for first-timers.

Conveniently scheduled on a Saturday, as part of the Women’s Health Fair, these appointments are for you if you:

- are at least 40 years old, and
- have never before received a mammogram, and
- are free of breast lumps and pain.

Lake Regional will bill your insurance or provide a special self-pay rate. Appointments are limited, and registration is required. To register, call Lake Regional Public Relations at (573) 348-8222.



*Know your risk for developing breast cancer and begin screening at the appropriate age*



**Caitlyn Vernon, DDS**  
102 E 9<sup>th</sup> St, Eldon  
573-392-3886



## Women’s health screenings offered **KNOW YOUR OPTIONS: Explaining breast cancer surgeries**

This Breast Cancer Awareness Month, Lake Regional encourages women to take action for their full health. One way is to learn more about all recommended screenings, not just those for breast cancer.

“Ask your primary care provider or women’s health care provider which screenings you need and why,” said Katie Helton, MSN, APRN, FNP-C, from Lake Regional OB-GYN in Osage Beach and Lebanon. “If you understand the reason for the screening, you are more likely to follow through and receive the benefits.”

Many insurance plans will cover this preventative care. Below are standard screening recommendations.

### Screening recommendations

**Blood pressure** – Starting at age 20, have your blood pressure checked at least every two years if it is in the healthy range, which is less than 120/80 mmHg. If your blood pressure is above normal, have it checked at least annually.

**Cholesterol** – Cholesterol testing should be done every five years for people age 20 or older who are at low risk for cardiovascular disease. If you are at a higher risk for heart disease, you should test more frequently.

**Skin cancer** – Perform monthly self-exams of your skin. Talk with your doctor about how often you should have in-office exams based on your skin cancer risk.

**Cervical Cancer** – The American Cancer Society recommends cervical cancer screening with a human papillomavirus (HPV) test alone every five years for everyone with a cervix from age 25 until age 65. If HPV testing alone is not available, an HPV/Pap cotest every five years or a Pap test every three years is recommended.

**Sexually transmitted infections** – Counseling on sexually transmitted infections is recommended for all sexually active women. Get tested for HIV, chlamydia and



**Katie Helton  
MSN, APRN, FNP-C**

other sexually transmitted infections if you are at increased risk. Further testing should be discussed with your doctor.

**Diabetes** – The U.S. Preventative Services Task Force recommends screening for pre-diabetes and type 2 diabetes in adults aged 35 to 70 years who are overweight or obese. The American Diabetes Association recommends that all adults aged 45 years and older be considered for diabetes screening by their health care provider every 3 years.

**Breast cancer** – The American Cancer Society recommends that women have yearly mammograms starting at age 45. (Women between 40 and 44 have the option to start screening with a mammogram every year.) Women 55 and older may choose to switch to every two years.

**Colon cancer** – The American Cancer Society recommends that people at average risk of colorectal cancer start regular screening at age 45. People who are in good health and with a life expectancy of more than 10 years should continue regular colorectal cancer screening through the age of 75.

**Lung cancer** – Starting at age 50, get screened annually based on your history of smoking.

**Osteoporosis** – At age 65, women should have a bone density test. Talk to your doctor if you feel you need to be screened earlier than 65.

In the fight against breast cancer, surgeries are powerful tools to promote healing and recovery.

“Surgical treatments range from biopsies at diagnosis to reconstruction for life after cancer,” says Lake Regional General Surgeon John Patton, D.O., FACOS. “Our cancer team develops every breast cancer treatment plan based on the individual patient.”

Following are some of the surgeries available in breast cancer care.

### Biopsy

A biopsy is often the first step after imaging reveals a concern. It involves removing fluid or a piece of tissue from the suspicious area. The removed cells are then tested to check for breast cancer.

“A biopsy determines for sure whether cancer is present,” Dr. Patton says.

Most biopsies take just a sample of cells, but some biopsies remove the entire

lump of abnormal cells plus a small amount of normal-looking tissue. This kind of biopsy is also called a “lumpectomy.”

Another biopsy often needed in breast cancer care is a sentinel node biopsy. This procedure removes a few lymph nodes for testing.

“If cancer cells spread from their original location, they usually travel first to nearby lymph nodes,” Dr. Patton says. “A sentinel lymph node biopsy allows us to gather crucial information to create an effective treatment plan.”

### Mastectomy

Some women with breast cancer will have surgery to remove the entire breast. This surgery is called a “mastectomy.” A “double mastectomy” removes both breasts.

“Whether a woman has a lumpectomy, a mastectomy or a double mastectomy depends on various factors, including cancer type and grade, as well as the woman’s

preferences for her body,” Dr. Patton says. “We have open discussions with our patients to help them weigh their options and make an informed decision.”

### Reconstruction

Many women who have a mastectomy will follow up with breast reconstruction surgery. This surgery helps recreate the breast’s shape, so women feel more comfortable in their bodies after cancer.

“Breast reconstruction can be a transformative experience for our patients, offering them a sense of wholeness and confidence,” Dr. Patton says.

### Embracing survivorship

After treatment ends, survivorship care begins. Regular follow-up appointments and screenings monitor a woman’s health and detect any potential signs of cancer recurrence.

“Our dedication to our patients extends well beyond



**Dr. John Patton, D.O.**

the surgical process,” Dr. Patton says. “We establish long-term care plans that ensure our patients feel supported, informed and empowered. Our care team is here to help women embrace life with hope and resilience.”

Learn more about the Lake Regional surgery team at lakeregional.com/Surgery.




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