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Could you walk a mile in her shoes?

On Sunday, cancer patient Suzanne Stinson will be holding her own 1.5 km walk to raise money and awareness for the rare form of cancer that she has battled for the past four years.

BY JEFFREY MORRIS

Suzanne Stinson holds back tears when she thinks of the first time she saw her grandson and held him in her arms.

"He is the one that keeps me going," she said, with the words sneaking out between the cracks of her tears. "My whole family is what keeps me going."

Four years ago, Stinson was diagnosed with pancreatic cancer. She was doing relatively well for four years, but over the summer, tumours were found on her liver and bones. She has something called CNETS (Carcinoid NeuroEndocrine Tumours). It is a rare form of cancer that is distinguishable by its neuroendocrine cancerous tumours. Only eight people in Ottawa have the condition, which is often misdiagnosed as Crohn's Disease. Just two months after learning she had the vicious form of cancer, her grandson, Corbin, entered the world.

"Seeing him for the first time changed the way I was thinking," she said. "It made me realize how badly I need to beat this. I don't just want to grow old with him, I will grow old with him."

While other cancer organizations have walks and fundraisers, there is very little for the type of cancer she has. There is CNETS Canada, but they are small in numbers and in stature.

Stinson has decided to create her own awareness campaign. On Sunday, she will



Suzanne Stinson, holding her grandson Corbin, will be walking 1.5 km Sunday to raise money and awareness for the rare form of cancer she is suffering from.

be doing a 1.5 km walk. She will be doing this to raise money and awareness for CNETS. She is hoping to raise \$4,000, and she will be surrounded by family and friends.

To look at Suzanne

Stinson, as she sits on the couch of her living room with her husband Brian and her Yorkshire Terrier, Finn, you would never suspect that she is at Stage 4 of the deadly disease, or that walking 1.5 kilometres would be dif-

ficult. But she struggles. She struggles to move around, and sometimes, even speaking is a challenge. Stinson will be using a walker for the 1.5 kilometres. Her condition gives her serious flu-like symptoms, including severe

diarrhea and flushing. She is weak, but she is driven to complete this walk.

"This is going to be an enormous challenge," she said of the walk. "It will be challenging physically, and it will be a challenge emotion-

ally. But you have to focus on things like this. I have to focus on raising awareness for the disease, learning about the disease. I lead a support group in Ottawa. Doing this walk is something that I have to do."

As one might expect with a rare disease, the diagnosis was complicated. Stinson was working for the City of Ottawa, and she had not been feeling well for a couple of weeks. In December 2003, she left work early one day to go to the hospital.

"I thought it was gallstones as I had just lost 60 pounds while on a diet," Stinson wrote in a summary of her journey. "After waiting for quite a while for the results, Brian and I were brought into a quiet, little office and given the news that they had found a tumour about the size of the palm of my hand. To confirm it was a tumour, they did a CT scan, which came back positive. The surgeon who was on call that night was tied up with another patient, so they sent me home with a prescription for the pain and something for my indigestion. They were going to call the surgeon's office the next day to set up an appointment for me. The appointment was made for one and a half weeks down the road. I finally got to see him, and after spending some time with him, he said he could not take me because my case was out of his range. He referred me to a surgeon at another hospital."

See **Cancer** on page 4

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NEWS

Cancer patient to walk to raise money, awareness

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"I waited another three weeks to see him. Because my records were not transferable, this new doctor had to do my CT scan again. This took about another three weeks, and then I finally got to see him. He was worth waiting for. My surgery was booked for the following week."

Stinson's surgery was not an easy one. The end of her pancreas was removed, and her gallbladder and spleen were also taken out. The surgeon also found that the portal vein, which is the main vein to the liver, was entangled into the vein that was feeding the tumour. A vascular surgeon was called into the operating room to detangle the vein. In all, the surgery took six and a half gruelling hours.

Stinson was in the hospital for nearly two weeks before being discharged. However, she had to return within a day of being released as she was vomiting and running a fever. She was readmitted, and the pain in the pancreatic area came back. An MRI revealed a fluid build up in the cavity where the surgery was done. A drain was put in, and she spent a few more days in the hospital before being sent home. Within a week, there were more complications. Stinson had a blood clot in her liver, and was admitted to hospital again and given fragment shots. After a week, she was sent home again. After three days at home, she was once again back at the hospital with severe vomiting and diarrhea. "A stool sample and blood work indicated that I had MSRI, a bacterial infection that can be caused from strong antibiotics," Stinson said. She was in isolation for two weeks before being sent home.

After a few months, Stinson began feeling better and returned to work.

"I never felt well after my surgery," she said. "I was always tired and had bouts of nausea, flushing and diarrhea. I did not know this was part of carcinoid syndrome."

"My yearly check-ups were always good, until my four-year check up. I had started having pain in my hip and went to my family doctor. She sent me for x-rays and they came back showing arthritis in my right shoulder, wrist and knee. I let it go and continued to live with the pain. I had my usual octreotide scan and then went for my appointment with my radiologist. I wasn't expecting anything but, when my radiologist came in to the room, he told me that I had two spots on my liver. He mentioned radio frequency ablation (RFA) but thought they were too small. He said there was nothing to worry about and that they would watch them. I also told him about the pain in my hip. He examined me but didn't think it was anything to worry about."

After six months, Stinson had another check-up in London and had an octreotide scan. They found bone cancer in her right hip, lesions that were about one centimetre in diameter.

"That explained the pain," Stinson said. "They sent back a report to my radiologist suggesting RFA and radiation on my hip. My

Jeffrey Morris photo
Her husband Brian and their Yorkie Finn have provided comfort, care, support and friendship for Suzanne Stinson as she battles a rare form of cancer.

daughter was getting married in August and we had a busy couple of months. So I decided to put off the RFA and radiation until after the wedding. I have had one more round of radiation since then and have been put on Hydromorph Contin, Lyrca and Dilaudid for pain."

Stinson still has the lesion, but the pain, she says, is well under control.

"I have started monthly shots of Sandostatin LAR," she said. "Currently, I am waiting for results from an MRI on my left knee. My oncologist thinks it is cancer related, but I am remaining optimistic that it is just a pulled ligament."

So, for Stinson, the walk on Sunday is going to be a monumental victory for her.

"I have such a great support network," she said. "My husband, Brian, has been an excellent caregiver, and this has not been easy on him. My family has been so supportive. This walk is going to be special. It won't be easy, but I will do it."

To support Stinson on her walk, visit www.cnetsscanda.org/fundraising.html.



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