



Lily Byrne/Staff Reporter
Stacey Pryor, owner of Sinfully Sweet Cafe in Homer -- and a breast cancer survivor -- holds a tray of her buckeyes before dipping them in chocolate. She kept working through her treatment

HOPE AWARENESS SAVES LIVES

Homer cafe owner works through her breast cancer, literally and figuratively

By LILY BYRNE
Staff Reporter

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Stacey Pryor likes to focus on the sweet things in life: her chocolate truffles with every flavor from salted caramel to champagne and amaretto; the cookies; the cupcakes; the fudge.

Her picturesque business on Main Street in Homer has always been her priority, even when she went through treatment for breast cancer two years ago.

In October 2022, Pryor was getting out of the shower and glanced at the mirror on her medicine cabinet. She noticed a burgundy area on her right breast.

"I didn't think too much of it, but I thought it was strange," Pryor said.

Within a couple days, she had had an ultrasound, mammogram, a surgery and biopsy. The doctors initially thought it was an infection, she said. It wasn't; it was stage four HER2+ breast cancer.

The HER2 gene creates HER2

proteins, which causes breast cells to grow and divide uncontrollably, Breastcancer.org says. When a breast cancer has the HER2 gene amplification, it often grows faster, and is more likely to spread or come back.

The cancer had just begun to spread to her lymph nodes under her right arm, but it was caught at a crucial moment, she said.

"I went through chemo, I went through radiation, I had a lumpectomy, I went through more chemo, and I finished treat-

ment on Oct. 13 of 2023," Pryor said. "I had the same attitude as most people have: 'Not me.' Denial. But luckily, it all moved so fast, I didn't have time to really process it."

Sinfully Sweet Cafe is open seven days a week, and only has a couple employees. As a self-employed person, Pryor let her cancer affect her work ethic as little as possible.

"I came in every minute that I possibly could come in," she said. "I had a ton of support, but all in

all, I worked through the whole duration when I could. There were a few days I was down and out, but most days I made some sort of appearance."

The unfortunate part of not mentally processing her treatment is that it is affecting her now. Every day, the emotions are catching up to her.

"My best advice would be to learn your body and know when you've had enough," she said. "I didn't rest enough, and I proba-

Continued on page 3



McNEIL&CO. SUPPORTS BREAST CANCER AWARENESS

EARLY DETECTION SAVES LIVES!

Early detection is the most powerful weapon against breast cancer. That's why it's important to make breast health awareness a regular part of your healthcare routine.

New law expands insurance coverage of breast cancer screening

On the first day of Breast Cancer Awareness Month, Gov. Kathy Hochul signed legislation to expand insurance coverage of breast cancer screening and imaging to include procedures as recommended by nationally recognized clinical practice guidelines for the detection of breast cancer. “Every woman in New York State should have access to the full scope of coverage options for breast cancer screening and imaging, which is key to early diagnosis and treatment,” Hochul said. “This legislation ensures that critical preventative services are available without financial constraint — saving lives and setting a new standard of care for New Yorkers.” Legislation S.2465C/A.1696C changes parts of the Insurance Law to require

individual, group, and non-profit (including HMO) health insurance plans to cover breast cancer screening and diagnostic imaging. This coverage applies if a doctor recommends it based on nationally recognized clinical guidelines. The screenings include diagnostic mammograms, breast ultrasounds, and MRIs. The legislation also clarifies that cost-sharing will not apply to these procedures except to the extent it would result in health savings account ineligibility under IRS guidelines. The legislation defines “nationally recognized clinical practice guidelines” to include evidence-based standards developed by independent organizations or medical professional societies using a transparent methodology and reporting structure.

Cayuga Health offers webinar on breast health

Cayuga Health will have a free, interactive webinar Oct. 24 on breast health and cancer prevention during Breast Cancer Awareness Month.

Register for the 6 p.m. event at www.cayugahealth.org/Breast-Webinar.

Experts and survivors will share life-saving information and stories about breast cancer. From understanding risk factors to navigating the latest in breast imaging, speakers will cover topics ranging from protecting oneself to supporting loved ones.

The virtual seminar will feature a panel of healthcare experts from Cayuga Health, including Dr.

Walter Silbert, nurse practitioner Cyndi Davis, Dr. Hilary Dietz, nurse practitioner Marie Harkins and Carla Baudrons of the Cancer Resource Center. Dr. Carol Berlin will be the master of ceremonies.

Cortland police sport pink badges

If you see Cortland police officers sporting a pink badge in October, they’re raising awareness of breast cancer, the department has announced.

October is Breast Cancer Awareness Month and officers made a donation to the Cancer Resource Center of the Finger Lakes to display the badge or a pink ribbon on their uniforms.

The Ithaca-based center offers a number of resources for people with cancer, including wellness programs, support groups, even a boutique that provides wigs, hats, scarves and mastectomy products. For details, go to crcfl.net.

Pink cups raise money for Guthrie Breast Care Fund

Guthrie is teaming with Dandy this month for their “Pink Cups for a Cure” campaign, raising money for the Guthrie Breast Care Fund throughout Breast Cancer Awareness Month.

For every large coffee purchased in a signature Pink Cup at any of Dandy’s 63 locations — including one in Freeville — a

portion of the proceeds will benefit local breast cancer patients: 20 cents for each large coffee sold.

Customers can also make a direct \$1 or \$5 donation through the Dandy app by redeeming loyalty points.

The Guthrie Breast Care Fund provides financial assistance for medications, post-surgical supplies, diagnostic testing and other needs not covered by insurance.

Last year’s Pink Cup drive raised \$20,000.

“Since 2011, Dandy is proud to say that we have raised over \$150,000 for breast care patients in our communities and are excited to make a difference once again this October through our partnership with Guthrie,” Dandy Vice President Dyson Williams said.

Guthrie offers Saturday mammograms in October

Guthrie hospitals, including Guthrie Cortland Medical Center, will offer Saturday screening mammograms throughout October, which is National Breast Cancer Awareness Month.

Early detection is key in the fight against breast cancer, The Sayre, Pennsylvania-based health group announced, and a mammogram remains the most effective screening tool for identifying breast cancer in its earliest stages.

To schedule an appointment, call 866-488-4743.

Besides Cortland, Saturday mammograms are available at Guthrie’s Corning Hospital, Lourdes Hospital in Binghamton, Robert Packer Hospital in Sayre, and Towanda, Pennsylvania, Tro and at Women’s Health on Shppers Road in Vestal.

BREAST CANCER RESOURCES

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60 Central Ave., Room 115
Cortland, N.Y. 13045
<https://www.cortlandcountyny.gov/529/Cancer-Services-Program>

CancerConnects, Inc.

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East Syracuse, N.Y. 13057
315-634-5004
www.cancerconnects.org
cancerconnects@gmail.com

Renzi Cancer Center

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Cortland, N.Y. 13045
607-756-3130
www.guthrie.org/locations/renzi-cancer-center-guthrie-cortland-medical-center

Share Cancer Support

www.sharecancersupport.org/breast-cancer
844-275-7427
Organization offering support groups, education, videos and more for breast cancer patients

Cayuga Cancer Center

1081 Commons Ave.
Cortland, N.Y. 13045
<https://cayugahealth.org/services/cancer/>

Living Beyond Cancer

www.lbbc.org/get-support/support-options
888-753-5222

Cancer Resource Center of the Finger Lakes

612 State St. Ithaca
607-277-0960
<https://crcfl.net/>
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Support group for patients and survivors

Breastcancer.org
www.community.breastcancer.org/
Active community support forum that connects with other people

CancerCare Support Groups

www.cancercare.org/support_groups
800-813-HOPE (4673)
Provides online support groups for patients, survivors, caregivers and bereavement

Susan G. Komen Breast Cancer Support Groups:

After Breast Cancer Diagnosis
www.abcdbreastcancersupport.org/get-support
Free phone-based peer mentor program that matches a trained volunteer with similar journey. Also has friends and family mentors available
800-977-4121

Virtual Breast Cancer Support Group

National Support Group
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Noon to 1 p.m. CST
www.nationalbreastcancer.org/nbcf-programs/breast-cancer-support-group

American Cancer Society – Cancer Survivors Network

www.cancer.org/treatment/support-programs-and-services/online-communities.html

Sharsheret

www.sharsheret.org/breast-cancer-for-men/

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Exercise helps patients during and after treatment

By KEVIN T. CONLON
City Editor
kconlon@cortlandstandard.com

When a woman is diagnosed with breast cancer, physical therapist Tolbert Jefferies is part of the team at the Renzi Cancer Center at Guthrie Cortland Medical Center assigned to her care.

“It is a fluid process,” Jefferies said. “We address needs as they come up.”

Exercising while undergoing cancer treatment – chemotherapy or radiation, or perhaps recovering from surgery – isn’t always easy, or pleasant. But it’s important, said Dr. Hillary Dietz, an attending medical oncologist at Cayuga Medical Center, both throughout treatment of breast cancer and afterward.

“In general, with our cancer patients, we promote activity,” Dietz said. “People think they have to be on bed rest, but that’s not true. The better you are during chemo or treatment, the better you do.”

Studies have found that women undergoing chemotherapy before breast cancer surgery can tolerate treatment and have better medical outcomes if they are participating in a structured exercise program, she said.

An analysis of 61 studies of women with breast cancer shows those who exercised during treatment had significantly improved quality of life, fitness, energy and strength, reports Harvard Health Publishing, part of Harvard Medical School. Women who exercise during breast cancer treatment also report less anxiety, depression, and lower body mass index and waist circumference compared with the regular care groups.

Dietz said aerobic exercises that work the whole body, such as walking, jogging and swimming are good choices, as are weight-bearing exercises to help maintain bone density.

“You have to be doing something that gets your heart rate elevated slightly, she said. “So doing housing work or errands is not enough.”

“Try to stay as physically active as you possibly can,” she said, noting 30 minutes of exercise a day for five days a week is a good goal.

Some symptoms resulting from chemotherapy or hormonal therapy can result in decreased muscle mass, said Jefferies, who suggested walking and strength training at least two times a week and exercises to improve flexibility. Cancer treatments can also result in pain and fatigue, which can also be eased with physical activity.

The recommended exercises vary, depending on the patient’s abilities, Dietz said.

Jefferies agreed. “Start slow,” he said. “We use the term, ‘motion is lotion.’”

Exercise can help address numbness, tingling and balance issues that result from treatment of breast cancer, he said.

“We often tend to be hard on ourselves,” Jefferies said. “Build up, try to exercise several times a week, maybe 10 minutes.”

A goal would be 150 minutes of moderate exercise each week, emphasizing stretching, flexibility and balance.

Range of motion can also be restored through exercise, Jefferies said, noting he works with patients on common tasks, such as stretching their arms over their heads and reaching for objects.

“I try to get people back to their prior level of functioning,” he said.

“Exercise is the one variable that people love, because they can control that,” Jefferies added. “By the time I see them, many events are beyond their control. It helps build self esteem. It helps build independence. It helps with recovery. You tend to do better.”



Photo provided by Guthrie Cortland Medical Center
Tolbert Jefferies, a physical therapist at Guthrie Cortland Medical Center, works with breast cancer patients throughout their care.

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Photo provided by Guthrie Cortland Medical Center
Tolbert Jefferies, a physical therapist at Guthrie Cortland Medical Center, works with breast cancer patients throughout their care.

HOMER CAFE OWNER

from Page 1

ly didn’t take as much time as I should’ve during that period of time, because now I’m finding that I’m suffering more. It’s all hitting me now, I didn’t have time to think about it, I was busy working and trying to get myself better.”

While she is grateful for the extra time she has with grandkids, she simultaneously deals with survivor’s guilt, she said, and the fear of the cancer returning.

“Being a small-business owner, it affects me everyday,” she said. “I have not just myself, but my employees. I have my family and a lot of people that rely on me, so

every day I try to take care of myself so that it does not recur.”

Pryor is grateful for the medical advancements that have been made in the last decade for HER2 breast cancer. It’s much more realistic for people to survive it now, she said. She is currently on a blocker, which gives her an extra 3% chance of the cancer not returning, she said.

Pryor urges all women to get regular mammograms. She hadn’t gotten one for about five years before her diagnosis.

“If one person reading this is convinced to get a mammogram, it would all be worth it,” she said.

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Physical symptoms of breast cancer

The World Cancer Research Fund International reports that breast cancer is the second most common cancer across the globe, and the number one cancer in women. Nearly three million new cases of breast cancer in women are diagnosed across the globe each year.

Breast cancer poses a notable threat to women's health, but research and resulting advancements in treatment have made the disease more treatable than ever. Women also can play a part in ensuring better outcomes in relation to breast cancer by educating themselves about the disease, including its warning signs. The MD Anderson Cancer Center notes that most changes to the breast are a byproduct of hormonal cycles or conditions that are not as formidable as breast cancer. So women should not jump to any conclusions when spotting such changes. However, the MDACC recommends women visit their phy-

sicians if they notice any of the following signs and symptoms of breast cancer.

- **Lump:** The MDACC notes that a lump in the breast or armpit is the most common symptom of breast cancer. Echoing assertions made by the MDACC, the American Cancer Society notes that most breast lumps are not cancerous. The ACS indicates a lump that is a painless, hard mass with irregular edges is more likely to be cancer, though cancerous lumps also can be soft, round, tender, or even painful. The lack of uniformity regarding cancerous lumps is one reason why it pays for women to be extra cautious and immediately report any abnormalities in the shape and feel of their breasts to their physicians.

- **Swelling:** The ACS notes that some women with breast cancer will experience swelling of all or part of a breast even if they do not feel a lump.



The MDACC recommends women visit their physicians if they notice any of the following signs and symptoms of breast cancer.

- **Dimpling:** The MDACC reports that women with breast cancer may notice dimpling or puckering on the breast. According to the ACS, the dimpling can sometimes make the breast look like an orange peel.

- **Nipple retraction:** The National Cancer Institute notes that nipple retraction occurs when a nipple turns inward into the breast or lies flat against the breast. Though nipple retraction can be a sign of breast cancer, the NCI notes that's not necessarily the case for all women. Some women experience nipple retraction due to aging, breastfeeding, injury, infection, surgery, or certain conditions of the breast.

- **Changes to the skin around the breast:** The ACS notes some women with breast cancer experience redness on the skin around the breast or on the nipple. Additional changes may include dry, flaking or thickened skin around the breast and nipple.

- **Discharge from the nipple:** The Mayo Clinic notes that it's normal to experience discharge from the nipple while pregnant and during breastfeeding. However, fluid coming out the nipple when a woman is not pregnant or breastfeeding could be a symptom of breast cancer.

- **Additional symptoms:** The MDACC notes scaliness on the nipple that sometimes extends to the areola is another warning sign of breast cancer. The ACS also reports that swollen lymph nodes under the arm or near the collar bone can indicate that breast cancer has spread even before the original tumor in the breast has been felt.

Breast cancer is a formidable yet treatable disease. Women who recognize any signs and symptoms associated with breast cancer are urged to contact their physicians immediately.

What the different stages of breast cancer signify

Upon being diagnosed with breast cancer, women and their families are presented with a wealth of information regarding the disease. Some of that information is unique to each patient, but much of it is based on decades of research and millions of successful treatments.

The American Cancer Society reports that cancer staging is a process during which doctors will attempt to determine if a cancer has spread and, if so, how far. Breast cancer stages range from stage 0 to stage IV. Each stage signifies something different, and recognition of what each stage indicates can make it easier for women to understand their disease.

Stage 0

The Memorial Sloan Kettering Cancer Center notes that when a woman is diagnosed with stage 0 breast cancer, that means abnormal cells are present but have not spread to nearby tissue. The National Breast Cancer Foundation, Inc. indicates stage 0 breast cancer is the earliest stage of the disease and is highly treatable when detected early. Indeed, the American Cancer Society reports a five-year survival rate of 99 percent among individuals diagnosed with stage 0 breast cancer.

Stage I

Stage I is still considered early stage breast cancer. The MSKCC notes a stage I diagnosis indicates tumor cells have spread to normal surrounding breast tissue but are still contained in a small area. Stage I breast cancer may be characterized as stage IA, which indicates a tumor is about as large as a grape and cancer has not spread to the lymph nodes, or stage IB, which indicates the tumor may be slightly smaller but is accompanied by small clusters of cancer cells in the lymph nodes or there is no tumor and only the small clusters in the lymph nodes. The ACS also reports a 99 percent five-year survival rate for patients diagnosed with stage I breast cancer.

Stage II

A stage II breast cancer diagnosis indicates the tumor is at least 20 millimeters (about the size of a stage IA tumor) and potentially as large as 50 millimeters. The tumor also can be larger than 50 millimeters if no lymph nodes are affected (stage IIB). The ACS notes the size

of the tumor may indicate if the cancer is stage IIA or stage IIB. The MSKCC notes that a stage IIA diagnosis could indicate there is no tumor or there is a tumor up to 20 millimeters and the cancer has spread to the lymph nodes under the arm. A tumor determined to be between 20 and 50 millimeters that has not spread to the lymph nodes also indicates a stage IIA diagnosis. A stage IIB diagnosis indicates the tumor in the breast is between 20 and 50 millimeters and has spread to between one and three nearby lymph nodes. According to Cancer Research UK, the five-year survival rate for stage II breast cancer is around 90 percent.

Stage III

Stage III breast cancer is considered regional, which the ACS reports notes had a roughly 86 percent survival rate between 2013 and 2019. The MSKCC notes that a stage III diagnosis indicates the tumor is larger than 50 millimeters and has affected lymph nodes across a wider region than in less developed stages of the disease. Cancers that have reached stage III may be categorized as stage IIIA, stage IIIB or stage IIIC. The American College of Surgeons reports that stage IIIA indicates a tumor of any size that has spread to between four and nine lymph nodes or a tumor larger than five centimeters that has spread to between one and three lymph nodes. Stage IIIB indicates any size tumor and that the cancer has spread to the chest wall. A stage IIIC diagnosis indicates the tumor can be any size and has spread to 10 or more lymph nodes.

Stage IV

Stage IV is the most advanced form of breast cancer. If the cancer has reached stage IV, that indicates the tumor can be any size and has spread beyond the breast to other parts of the body, potentially including organs and tissues. The ACS reports that survival rate for this stage, which is considered distant, is 31 percent. However, the breast cancer advocacy organization Susan G. Komen notes that only around 6 percent of breast cancer diagnoses in women diagnosed for the first time have reached stage IV at the time of diagnosis.

Staging makes it easier to understand a breast cancer diagnosis. More information about breast cancer staging is available at mskcc.org and cancer.org.

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What young women should know about breast cancer

A prevailing myth concerning breast cancer is that it only affects older women. Various medical organizations and institutions recommend women begin receiving mammograms starting at age 40, which may compel women younger than 40 to think that they are immune to breast cancer. Yale Medicine notes breast cancer in younger individuals is rare, but the organization reports it is the most common cancer among women between the ages of 15 and 39. In addition, a body of evidence points to a growing rate of breast cancer diagnoses in younger women.

The Cleveland Clinic says breast cancer in young women and people assigned female at birth is known as early-onset breast cancer. Even adolescents and young adults can get breast cancer. Although young people can get any form of breast cancer, invasive ductal carcinoma and triple-negative breast cancer are the most common forms of the disease among young women.

Diagnoses of breast cancer have steadily risen in women under age 50 over the last 20 years, says the Washington University School of Medicine in St. Louis. Researchers believe the surge is largely driven by increases in the number of women diagnosed with estrogen-receptor positive tumors, which



A prevailing myth concerning breast cancer is that it only affects older women.

are cancerous tumors fueled by estrogen. The researchers also found higher rates of breast cancer among Black women, particularly those between the ages of 20 and 29. Black women in this age group were found to have a 53 percent increased risk of breast cancer.

The Breast Cancer Research Foundation says that breast cancers in women under age 40 are more likely to have features that

contribute to poorer outcomes and prognoses. Larger tumor size, advanced tumor stage, negative hormone receptor status, and an over-expression of the HER2 protein are some such features. The BCRF also reports younger women are more likely to experience a recurrence at five and 10 years after therapy compared to older women.

It is essential for younger women to be in tune with their bodies

and learn to recognize any signs that may be indicative of breast cancer. Since annual screenings are not often part of preventative health plans for women younger than 40, adolescents and young

adults need to alert their doctors if they suspect anything is wrong. Unfortunately, by the time a tumor in the breast can be felt, it likely has been present for some time already. Symptoms of breast cancer may include:

- Inverted nipple
- Breast lump or a lump in armpit
- Breast pain
- Changes in the skin of the breast
- Nipple discharge with or without pain
- Swollen lymph nodes

Any of these signs should be discussed with a primary care physician or a gynecologist.

Younger patients also are more likely to have a genetic connection to breast cancer. Individuals with one or more family members who were diagnosed with breast cancer are at higher risk and may want to consider screening at earlier ages.

Breast cancer is not a disease that only affects women 40 and older. Younger people can get breast cancer, and it's often a surprise and sometimes more aggressive.

COVID-19 vaccine: Should I reschedule my mammogram?

From the Mayo Clinic

QUESTION: I just got my COVID-19 vaccine. Should I reschedule my mammogram?

ANSWER: Not necessarily. There's concern that side effects from the vaccine to prevent coronavirus disease 2019 (COVID-19) could be mistaken for breast cancer on a mammogram. But that doesn't mean you should cancel your mammogram if you've received your vaccine. Instead, contact the facility where your mammogram is scheduled to ask for guidance.

The vaccine that prevents COVID-19 can cause swollen

lymph nodes under the arm in which the shot was given. Your lymph nodes are part of your body's germ-fighting immune system. The swelling in the lymph nodes is a sign that your body is responding to the vaccine and building up defenses against the virus that causes COVID-19.

Breast cancer also can cause swelling in the armpit if cancer cells spread to the lymph nodes.

Some doctors are concerned that having a mammogram soon after vaccination may cause unnecessary worry about swollen lymph nodes. For that reason, some have recommended waiting four to six weeks after your final vaccine dose before having

a mammogram. That way, any lymph node swelling caused by the vaccine has time to go away.

Others, including Mayo Clinic, recommend that mammograms continue as scheduled. But be sure to tell your doctor about your vaccination, the date it occurred and which arm was affected. This information will be helpful for understanding the mammogram images.

If lymph node swelling is found on your mammogram and you've recently received the COVID-19 vaccine, the doctor who interprets your mammogram images (radiologist) will consider this when recommending whether additional imaging or follow-up is needed.

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Doug Schneider/Staff Reporter

Cortland firefighters are sporting pink in October to raise awareness of breast cancer. Their T-shirts, hoodies and other apparel feature an image of a hose twisted as a pink ribbon and the message: "No one fights alone."

They don't just survive, the raise money to help others thrive

By DOUG SCHNEIDER
Staff Reporter
dschneider@cortlandstandard.com

For Kathleen Mezzaluna, the past years have been all about honoring the memory of her daughter, Laurie, who died almost 15 years ago.

For Wayne and Kathleen Friedman, the memories of Kathy's successful cancer battle are still vivid — though she's been free of the disease for nearly a decade.

For Sheila Ossit — also a breast cancer survivor — hearing her diagnosis prompted a surprise that approached shock. She and her husband were raising children, including a daughter.

Breast cancer isn't cheap. If insurance pays for the bulk of the

treatment — if one is well-insured — other costs remain. Travel for treatment, and sometimes housing. Incidentals, wigs, prosthetics. Medication co-pays. It adds up — \$200 a month for the typical breast cancer patient, reports the National Institutes of Health.

Fundraisers step up, sometimes to help with the cost, sometimes to simply raise awareness. Pink police badges, ribbon-adorned clothing, motorcycle rides by groups like the Chrome City Divas. They all chip in.

Laurie Mezzaluna, with degrees from Boston University in communications and Chinese history, died at age 41 in 2009, five years after founding the Saint Agatha Foundation. Her mother has continued her daughter's work to fund the expenses of cancer patients in Central New York. The name honors the patron saint of breast diseases.

The foundation serves residents of Cortland County and seven other counties and funds expenses for cancer patients.

"Laurie started a fund after she got sick," at the age of 27, her mother said. "I promised her I would help it (grow). It has grown exponentially."

Its annual fund-raising gala is Oct. 24 at Syracuse's OnCenter.

More than 15,000 women and 150 men are diagnosed with breast cancer each year, the foundation reports; about 2,600 die from the disease.

The foundation has helped 12,000 women "just to relax and heal," Mezzaluna said. They needn't worry about having the gas to drive to appointments, or the money to pay utility bills. The foundation has paid for patients' legal help. It's even paid for YWCA memberships so patients have a place to swim or exercise.

"Everyone thinks there's a catch," Mezzaluna said.

There isn't.

'NO ONE FIGHTS ALONE'

Wayne and Kimberly Friedman's message is on almost every T-shirt and hoodie Cortland firefighters are wearing this month: No one fights alone.

It's a reminder that Wayne Friedman, now Cortland's fire chief, has a role in his wife's health, just as any loved one does. The reminder is all over the Cortland fire station, where firefighters wear T-shirts showing a pink hose wrapped in a ribbon and the message: "No one fights alone."

It's similar in concept to Cortland's police wearing pink badges to raise money for the Cancer

Resource Center of the Finger Lakes.

Almost a decade ago, Kimberly Friedman woke up from surgery, a radical mastectomy, at Memorial Sloan Kettering Hospital in New York. The brain fog made remembering that Wayne Friedman was just down the hall difficult. She remembers screaming, although her husband does not.

But he was there.

Before her diagnosis, Kimberly Friedman's life was a ball of stress. And after? "From the moment I'd wake up in the morning, the fear would start to come in."

"I could choose to think about the fear, or push it out," she said. "That's taken a great effort; it's a full-time job of being well."

She has traded her stress-heavy existence for one where she regularly posts messages on Tik-Tok with reminders to "relax" and especially, "breathe."

The Friedmans plan a trip next spring to Key West, Fla., to celebrate 20 years of marriage.

RINGING THE BELL

"I was getting her ready for the prom," Ossit said of her life at the time she was diagnosed. "I had a job. There were a lot of other things. I didn't have time for cancer."

But she got a diagnosis: "You have breast cancer."

"I was 49," she recalls. "I had kids to raise, a job." She thought she was too young.

Today, she considers herself a survivor — a "thrivor." She was fortunate, she says, that she was diagnosed early, and that the radiation treatments left her cancer-free.

Still, treatment left her exhausted, especially from driving to Syracuse and back. It was hard on her husband, too; he'd lost his mother to cancer.

Ossit kept working during treatment, then later moved into a new role: raising money via the Cortland Memorial Foundation for groups that care for cancer patients.

She mentions several, including Syracuse-based Hope for Heather, which provides comfort items, to patients recovering from surgery, to gasoline cards to help patients fuel their cars for a check-up or treatment.

Now, she gets to work with social workers at the Renzi Center at Guthrie Cortland Medical Center, which opened in 2021, after Ossit's cancer treatment.

"This is in the community where we live," she said. "I love my job."

And she gets to ring the bell, a hospital celebration when a patient graduates from treatment.

Committed to the Community

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Foundations

- Saint Agatha Foundation — SaintAgathaFoundation.org.
- Cortland Memorial Foundation — www.guthrie.org/cortland-memorial-foundation
- Hope for Heather — <https://www.hopeforheather.org/>

Noteworthy statistics underscore the prevalence of breast cancer

Breast cancer affects millions of women and their family and friends every year. Each of those women has their own unique experience upon receiving a breast cancer diagnosis, and those journeys hopefully end with successful treatment. Because each woman's breast cancer journey is unique, data regarding the disease only tells part of the story. But recognition of key breast cancer statistics is still important, as data can compel support for women fighting the disease and underscore how vital it is for young women to prioritize breast health.

• A 2017 study from the American Cancer Society found that roughly 42 percent of cancer diagnoses and 45 percent of cancer deaths in the United States are linked to controllable risk factors for the disease. Breast cancer is no exception in that regard, as the



Recognition of key breast cancer statistics is important, as data can compel support for women fighting the disease and underscore how vital it is for young women to prioritize breast health.

Breast Cancer Coalition Foundation points to studies that have shown as many as 50 to 70 per-
Continued on page 7



Parents pass down many things to their children, including hair color, height, and various other traits. Parents also can pass on an increased risk for breast cancer.

A look at inherited breast cancer

Individuals can make various changes to their lifestyles to help reduce their chances of developing certain types of cancer, including breast cancer. One thing they cannot change is their genes, prompting curiosity about the role of family history in relation to breast cancer risk.

First-degree connection

Parents pass down many things to their children, including hair color, height, and various other traits. Parents also can pass on an increased risk for breast cancer. Cancer Research UK says some people have a higher risk of developing breast cancer than the general population simply because other members of their families have had cancer. The organization says having a mother, sister or daughter (also referred to as a first-degree relative) diagnosed with breast cancer approximately doubles a woman's risk for breast cancer. This risk grows even higher when more close relatives have breast cancer, or if a relative developed breast cancer before reaching the age of 50.

Inherited damaged genes

Johns Hopkins Medicine says about 10 percent of breast cancers are related to inheritance of damaged genes. Several genes are associated with elevated breast cancer risk, including BRCA1 and BRCA2. Additional genes associated with an increased risk for breast cancer include PALB2, ATM, CHEK2, CDH1, STK11, PTEN, TP53, and NF1. People who have inherited a damaged gene may have a particularly high risk of developing breast cancer or other cancers, depending on the specific gene and their family history.

Getting tested

Johns Hopkins says individuals can be tested for genes that put them at risk for cancer. That is a decision that merits ample consideration, and one that should be carefully discussed with a doctor and family members. Genetic counseling can look for inherited mutations in the BRCA1 and BRCA2 genes, the two most notable for increasing breast cancer risk. A blood test is typically covered by insurance companies and analysis can take a couple of weeks. More can be learned about genetic counseling and testing at www.cancer.org.

Whether or not to get genetic testing is a personal decision. However, learning the outcome may help protect future generations. Someone with a genetic mutation has about a 50 percent chance of passing that trait on to children.

Additional risk factors

Heredity is just one risk factor for breast cancer. The American Cancer Society says White women are slightly more likely to develop breast cancer than some other races and ethnicities. Studies have found that taller women have a higher risk of breast cancer than shorter women, although the reasons for that are not exactly clear. In addition, women with dense breast tissue have a higher risk of breast cancer than women with average breast density. Women who began menstruating early (especially before age 12) have a slightly higher risk of breast cancer. That risk can be attributed to a longer exposure to the hormones estrogen and progesterone. The same can be said for women who experienced menopause later (typically after age 55).

Various factors can increase the risk of developing breast cancer, including genetic markers and family history of the disease.

STATISTICS • from Page 6

cent of breast cancers can be prevented if women adopt lifestyle changes early enough.

- The ACS estimates that approximately 30 percent of postmenopausal breast cancer diagnoses are linked to modifiable risk factors such as diet and physical activity levels.

- The World Health Organization reports 2.3 million women across the globe were diagnosed with breast cancer in 2022. WHO data also indicates 670,000 women lost their lives to the disease in 2022.

- Breast cancer poses a greater threat to women's lives in countries with a low Human Development Index (HDI), which is a metric used by the United Nations Development Programme to gauge a country's average achievement in areas such as healthy life and standard of living. WHO data indicates one in 12 women will be diagnosed with breast cancer in their lifetime and one in 71 women will die of the disease in countries with a high HDI. In countries with a low HDI,

where access to medical care is more limited, one in 27 will be diagnosed with breast cancer and one in 48 will die from it.

- Five-year survival rates indicate that treatment is most effective when breast cancer is caught in its earliest stages. Data from the ACS indicates a 99 percent five-year survival rate for cancer discovered before it has spread beyond the place it started. When the cancer is considered regional, which the National Cancer Institute defines as cancer that has spread to nearby lymph nodes, tissues or organs, the five-year survival rate is 86 percent. The five-year survival rate for distant cancer, which indicates it has spread to distant parts of the body, is 30 percent.

- Survival rates differ considerably between Black women and White women diagnosed with breast cancer. According to the ACS, the five-year survival rate for Black women between 2012-2018 was 83 percent compared to 92 percent for White women during that same period.

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3 strategies that can lower breast cancer risk

Breast cancer affects millions of individuals each year. The World Cancer Research Fund International reports that breast cancer is the most commonly diagnosed cancer in women across the globe, affecting roughly 2.3 million women each year.

Despite the global prevalence of breast cancer, various organizations report high five-year survival rates, particularly among women whose cancers are detected in the earliest stages of the disease. In fact, a 2023 study published in the journal *BMJ* found that the risk for dying from breast cancer in the five years after an early-stage diagnosis fell to 5 percent in recent years, a notable improvement from the 14 percent risk of death that was reported in the 1990s.

Increased survival rates for breast cancer are welcome news for women and their families. The higher survival rates are a byproduct of the tireless efforts of cancer researchers, who also have discovered links between the disease and certain lifestyle factors. Though there's no way to eliminate one's risk for breast cancer entirely, the American Cancer Society notes certain variables are within women's control. With that in mind, women can consider these three strategies that can lead to improved overall health and might help women lower their risk for breast cancer as well.

1. Reach and maintain a healthy weight. The benefits of maintaining a healthy weight include a lower risk for heart disease and stroke, and women should know that weight and breast cancer risk are linked as well. According to the ACS, increased body weight and weight gain as an adult are linked to a higher risk of develop-

ing breast cancer. That's particularly so among post-menopausal women. A 2023 study published in the journal *BMC Women's Health* found that the chances of developing breast cancer increase among post-menopausal women who are obese.

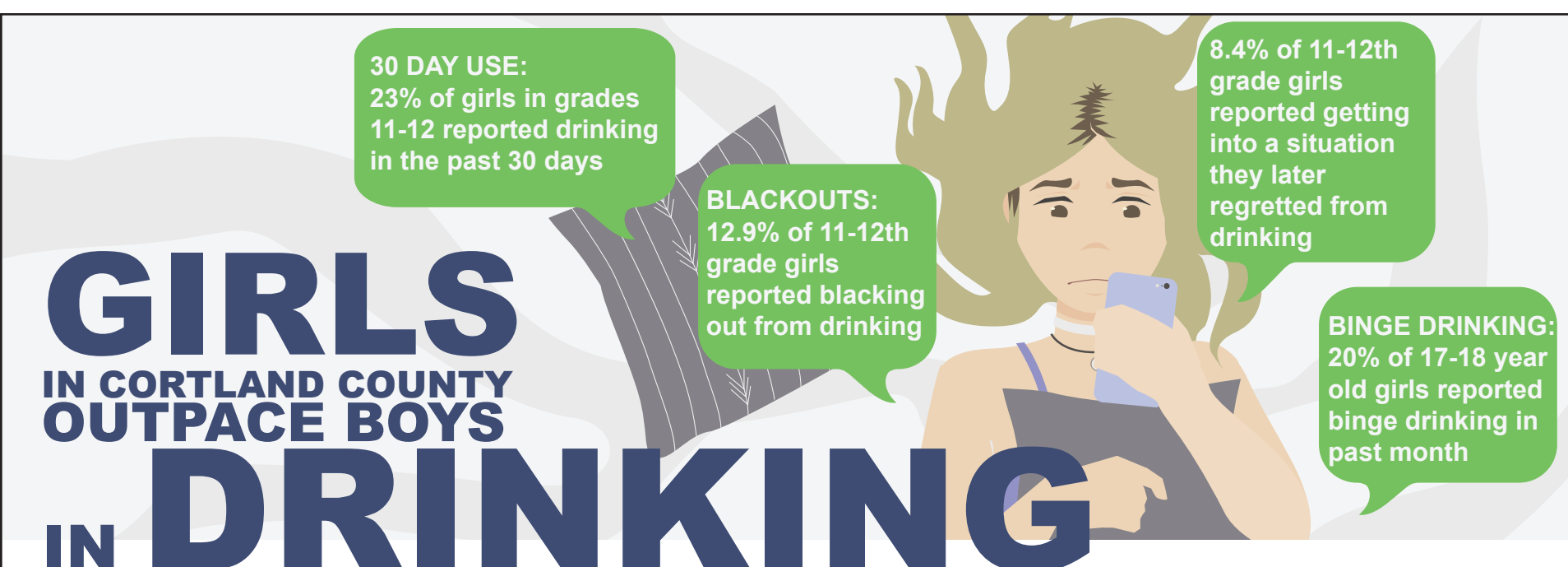
2. Avoid a sedentary lifestyle. Exercise is one of the ways to achieve and maintain a healthy weight, so it makes sense that being physically active can reduce breast cancer risk. The National Cancer Institute reports that a 2016 meta-analysis of 38 cohort studies found that the most physically active women had between a 12 and 21 percent lower risk for breast cancer than women who were the least physically active. The NCI also notes that additional studies have found that women who become more physically active after menopause also have a lower risk for breast cancer than those who do not.

3. Limit or eliminate alcohol consumption. The ACS urges women who drink to consume no more than one alcoholic drink per day, noting that consumption of even small amounts of alcohol have been linked to an increased risk for breast cancer. Officials with the MD Anderson Cancer Center note that the link between alcohol consumption and breast cancer risk is low. However, the MDACC notes that alcohol can contribute to unwanted weight gain, thus increasing cancer risk. In addition, alcohol can increase levels of estrogen and other hormones associated with breast cancer.

It may be impossible to completely prevent breast cancer. However, women can embrace strategies that improve their overall health in ways that lower their risk for breast cancer.



Maintaining a commitment to a physically active lifestyle throughout life can help women lower their risk for breast cancer.



Understanding the Situation

Data from the 2023 Cortland County Youth Survey draws attention to a troubling trend: a notable percentage of girls, especially those in grades 11-12, are involved in alcohol use and binge drinking. 23% of girls in grades 11-12 reported drinking in past 30 days compared 14% of boys. Girls are also experiencing various negative consequences associated with their alcohol consumption.

Girls are not merely experimenting with alcohol; they're consuming it in quantities that can cause severe harm. The data reveals that of the girls aged 17-18, 20% admitted to binge drinking in the past month. As parents, educators, and community members, it's crucial to understand the severity of these figures. Alcohol can profoundly affect the developing teenage brain, potentially impacting cognitive functions, decision-making abilities, and emotional health.

According to the survey, girls 11-12th grade report notably higher rates of hangovers (16% compared to 9% for males), getting sick due to drinking (13% against 10%), and problems with their mental health (8% versus 5%). The data highlights clear gender disparities in the consequences of alcohol consumption among adolescents. This not only jeopardizes their health, but can also lead to poor academic performance, strained relationships, and high-risk behaviors.

Prevention Strategies

The focus should be on prevention, education, and early intervention. Here are some steps parents can take to help prevent alcohol use among their girls:

Open Communication: Create a space where your daughters feel safe talking about alcohol, such as by listening without judgment and asking open-ended questions. Talk about the risks and consequences, and encourage them to share their thoughts and any peer pressure they might be experiencing. Honest, non-judgmental conversations help build trust, making it easier for them to come to you when they need help.

Set Clear Expectations: Make sure your daughters know your rules about underage drinking. Set clear rules and consequences for alcohol use. Having clear boundaries helps them understand what you expect and why making healthy choices is important. Be consistent with the rules and explain why they exist so they understand the risks involved.

Be Involved: Be a part of your daughter's life. Know who their friends are and who their friends' parents are. Encourage them to join activities like sports, clubs, or other hobbies that keep them busy and provide a healthy way to use their energy. Being involved in activities can help build their confidence, make them feel like they belong, and keep them from using alcohol to fit in or deal with stress. Show interest in their hobbies, attend their events, and make time for family activities to build a strong connection.

Early Education: Start talking about alcohol early. Give your daughters accurate information about what alcohol does to their body, mind, and future. The sooner these conversations start, the better prepared they will be to handle peer pressure and make smart choices. Use real-life examples and age-appropriate language to make the information relatable. Keep reinforcing these messages as they grow older and face new challenges.

Model Responsible Behavior: Kids often copy what adults around them do. Set a good example by drinking responsibly, if at all, and showing healthy ways to handle stress. Avoid making alcohol seem like a fun or necessary part of life. Show that you can have fun without alcohol. Setting a good example helps teach your daughters the importance of making safe choices.

Seek Professional Help If Necessary: If you notice signs of alcohol abuse, seek help from a mental health professional immediately. Early intervention can prevent the evolution of more severe issues. Locally, Family & Children's Counseling Services offers counseling and prevention services for teens and young adults. You can learn more here: <https://fcs-cortland.org/>

Source: 2023 Cortland Youth Survey