

back to work



most women return, and many also make time for play

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Six years ago, and just three weeks after the birth of her daughter, Tricia Chambers-Balas discovered that she had invasive ductal carcinoma. Chambers-Balas, now 42, had to think hard about how to perform her demanding management job while recovering and raising an infant.

The work was tough even for a healthy person: overseeing 23 nurses and traveling to manage disability claims for the lighting manufacturing company OSRAM Sylvania in Danvers, Massachusetts. But the job was the glue of her existence, and she felt she couldn't give it up. "Work had been such a big part of my life that I wanted to stay connected," Chambers-Balas explains.

She negotiated a part-time schedule through eight months of chemotherapy, then gradually went back to full time. But she knew she would still need some special accommodations to keep doing her job.

"When you go through breast cancer treatment, your mind makes appointments that your body cannot keep," she says. "In chemo, at three in the afternoon I would hit a brick wall. All I would need was a 20-minute nap. You can't do that at headquarters."

Luckily, her company was piloting a telecommuting program and she grabbed at the chance. Skipping her 50-minute commute was a great stress reliever, and working at home made her feel better.

Her bosses were so happy with the arrangement that they made it permanent. And when a colleague was diagnosed with breast cancer, she was allowed to follow the example of Chambers-Balas. "It worked brilliantly," Chambers-Balas says. She went on to launch a program designed to enhance the productivity of sick and disabled workers. In its first year,

the program saved OSRAM \$1.4 million and improved the company's absenteeism and back-to-work policies.

Chambers-Balas says her mother, who endured breast and ovarian cancer over two decades, inspired her to keep going. "My mother lived very fully with cancer, raising six children and even traveling to Europe," she remembers. "Yes, it's scary, and yes, it's horrific. But when you're faced with something you think is larger than life, you just do it."

Some cancer survivors decide to retire; others splurge on dream projects or vacations if they can. But most return to work in some capacity. They do it for their sanity, or because they need the money or the health insurance.

Chambers-Balas' solution was to make telecommuting arrangements. Other breast cancer patients do temporary work, dramatically reduce their hours or drop high-powered careers for less demanding work. And then there are those who try to carry on as though they had never gotten sick.

Research suggests that most women with breast cancer rejoin the workforce sooner or later. There hasn't been very much research in this area, but a small 2001 study of post-mastectomy breast survivors surveyed in the late 1990s by Martha R. Hinman, an associate professor of physical therapy at the University of Texas' Cancer Center

MICHAEL ZIDE

Home Sweet Work: After her diagnosis, Tricia Chambers-Balas—and a flexible employer—found ways to balance treatment and a demanding job.

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in Galveston, and published in the journal *Women & Health*, found that some 80 percent returned to work.

Likewise, a May/June 2002 study of 253 male and female survivors of all cancers in the Detroit metropolitan area found that 67 percent were working again five to seven years after diagnosis. "As more people are diagnosed at earlier stages and surviving cancer, they are increasingly likely to be at working ages, where issues regarding productivity and employment . . . must be addressed by patients and employers alike," concluded the Detroit study. The study was published in *Psycho-Oncology* by Cathy J. Bradley, PhD, an associate professor at Michigan State University's Department of Medicine and Heather L. Bednarek, PhD, an assistant professor of economics at Saint Louis University.

Many doctors urge breast cancer survivors to keep working if they can. That's partly to maintain their identi-

Quality time: Telecommuting means that when Chambers-Balas takes a break, daughter Maddie and cat Cosmo provide her with needed reinforcement.

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ties and "a sense of being more than a patient who walks around in a gown and is bald," says Gail Gazelle, MD, a Harvard Medical School assistant professor who runs a practice dedicated to helping patients with grave and terminal illnesses and their families.

Doctors' advice is generally to keep doing what you've always done, when possible. "If you wear makeup, you've got to put your makeup on," says Deborah Axelrod, MD, a New York City surgeon and the director of clinical breast services at the New York University Hospital and Medical Center. She suggests sequestering the cancer in one of several rooms in your brain. "When you go to work, you have to shut the door, and you can't open it and let it out until you get home."

Expectations make a difference, too. While teaching in the Czech Republic in 1995, Dr. Axelrod discovered that breast cancer sufferers who were automatically placed on disability were more likely to feel sick. "Some of the trouble with fear of cancer is that we've made people socially feel ill," she says. She believes it's better to think: "I am sick now, but I am going to be recovering and into the swing of things again."

let's make a deal

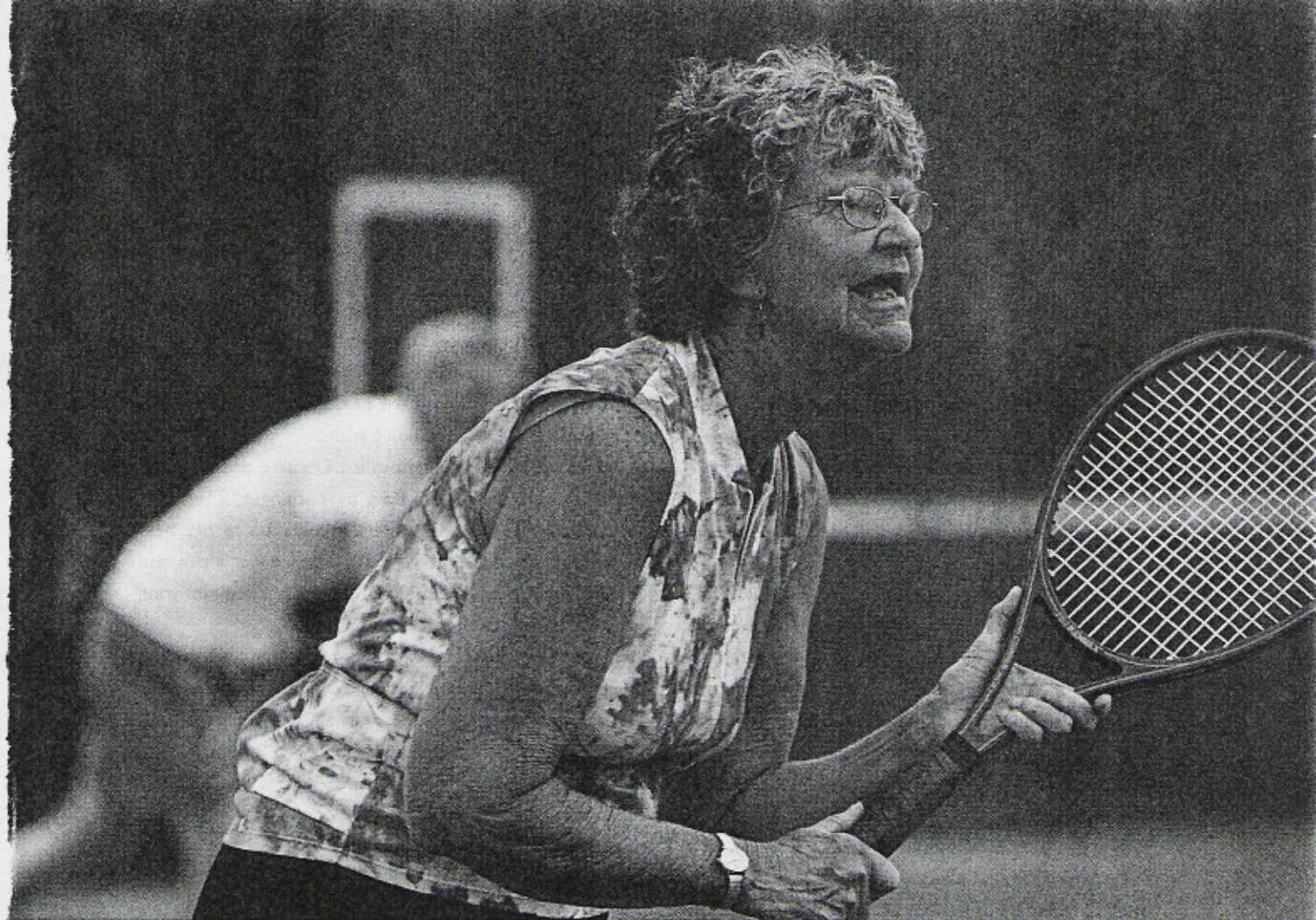
It's the question your boss and colleagues won't dare ask. But Joan Brinkhuis's fourth and fifth graders were disarmingly candid.

Are you going to die? they wanted to know.

Brinkhuis, 57, an elementary school teacher, would answer, "No, I'm going to be OK." Today people can survive breast cancer, she would tell them. Then if their own mothers or grandmothers were sick, they would understand, she says. Which isn't to say it was easy. During chemo, at times feeling bone-tired from the drugs, she was at work every morning at 7:30 and there in the evening until 5:30, she says. And that didn't include evening preparations for the next day's class.

Leveling with her supervisors at the Port Washington, New York, school where she's taught for 34 years, wasn't a problem. Her principal and colleagues supported her in more ways than one; they never let her go to chemo appointments alone.

But because she needed their help, she had to be upfront with the children's parents, too. The fall after she was diagnosed, Brinkhuis made a deal with them: She would be there every day to teach, if they kept home any child who



had the slightest illness, since a virus or bacterial infection could penetrate her weakened immune system easily. She missed only one day, and sick children very rarely appeared.

Brinkhuis attributes her determination less to heroics than to the fact that work provided her chief emotional support system. Brinkhuis lost her husband when she was 42; at the time of her diagnosis, her daughter was just beginning college; her parents were retired in Florida. "I've had friends who took time off," she says. "Those were the people who had husbands to dote on them. The best thing for me was to pretend that nothing had changed."

Naturally, it helps if your employer is understanding, and increasingly bosses are—or have to be. The Americans with Disabilities Act, which prohibits firms with 15 or more employees from firing or discriminating against workers with a disability such as cancer, has heightened corporate America's awareness of patient rights. US firms have increasingly adopted policies aimed at accommodating survivors, and are making it easier for them to do their jobs. The act requires all but state

Service! 72-year-old Emily Kimball has a brand-new set of priorities, and allocates her energy more carefully.

employers to make "reasonable accommodations" for workers deemed disabled, including flexible hours, extended leave and special equipment or training materials, as long as it doesn't present an "undue hardship" for the firm. Awareness—plus the need to comply with the law—may be creating a more accepting work climate.

Egregious incidents still happen, though. The federal Equal Employment Opportunity Commission, which enforces the act, sees up to 450 cancer-related filings each year. But the ADA won't protect you if you can't do your job, so you need to find a job you can handle or negotiate an arrangement with your employer to make your current workload more manageable. Many people may need to work out a flexible schedule, work from home or get assistance with certain physical tasks if they are coping with lymphedema or fatigue.



Kimball still works, but spends more time playing tennis, hiking and biking these days

a good compromise

Tracy Pleva Hill, 36, tried everything to keep up, but eventually she had to shift into a lower gear. Not that the public relations executive didn't fight fiercely to prevent first breast cancer and then a metastasis to the brain from derailing her high-powered career. She couldn't afford to be unemployed; though her husband works building and repairing racecars, her family relied on her income and health insurance. "I'm between this rock and hard place—I need to work," she explains.

Even after undergoing a mastectomy in 2000, then chemotherapy after the cancer spread to her lymph nodes, Pleva Hill continued commuting two hours to work from the Westwood, New Jersey, home she shares with her husband and then-toddler son. One weekday morning off for chemotherapy, and occasional discreet naps in the conference room, were the main concessions she asked for, and won, from her understanding bosses.

"They were very cool," Pleva Hill recalls. "If I needed to take a nap for an hour, I would just excuse myself." But in a souring economy, her firm went under in 2002. In October of 2003, doctors discovered that the cancer had metastasized to her brain. That didn't stop her. A week after surgery, Pleva Hill was applying for jobs on the Web. This despite undergoing radiation treatment that made her hair fall from the back of her head in an "X" pattern. After interviews, "I would back out of rooms," she says.

Several near-offers fell through, and Pleva Hill wondered if potential employers were finding her out by feeding her name into the Internet search engine Google. She'd been public about the cancer, through her involvement in the Young Survival Coalition, a advocacy group based in New York and had participated in a documentary called *Fighting for Our Future*—about women under 40 with breast cancer—which aired on Lifetime Television in 2002. At one agency, she'd passed a battery of interviews, and was about to meet the president, when the company withdrew the offer after discovering she needed one morning a week off. This request was a deal-killer at several places.

Just when Pleva Hill's unemployment benefits were running out, she spotted an ad for a part-time public relations job at a maker of natural health products, a mere 10 min-

utes from her home. She hated her wig, but this time she wore it to the interview. They loved her.

For the first two weeks on the job, she wore the wig every day. She didn't intend to keep the cancer a secret, but "I was trying to get them used to this" gradually, she says. Then one day, she was standing with her supervisor at a deli counter when her oncologist called. Decision time. "I wasn't going to not take the call from my oncologist," Pleva Hill says firmly. Turning with some trepidation to her boss afterward, she was relieved that he pulled out a pen and wrote down his home and cell-phone numbers, insisting she call him if she needed anything.

Pleva Hill misses her hard-charging career. She's taken a 55 percent pay cut, and it isn't easy to watch her friends being promoted, earning big salaries and founding their own firms. Long-term disability and life insurance are out of the question for her. But she works about 27 hours a week and still sees her doctor regularly. "I found a good place," she reflects. "These people care about their employees."

less work, more fun

Many doctors advise patients to exercise during and after cancer treatments to boost vibrancy and more quickly resume their old life. Emily Kimball embraces that approach. Diagnosed with Invasive Ductal Carcinoma at 71, Kimball runs a motivational speaking business in Richmond, Virginia. Vigorous exercise has been central to her life: In a decade she's hiked the 2,000-mile Appalachian Trail and biked across the country. Since discovering that she needed to allocate her limited energy more carefully after treatment, Kimball spends more time playing tennis, hiking and biking these days. She still enjoys her work for the challenge, travel and money, but sometimes, she opts for less work and more fun.

"I'm not feeling guilty that I haven't put out my newsletter or updated my website," she says, even after a reader wrote her nastily: "Your website is so old that I thought you died." Instead, she went on a 400-mile Florida bike ride. The day she spoke with MAMM, she'd meant to take care of some administrative tasks in her home office. But she changed her mind and worked in her new garden instead. "I've never had a garden before," she says. "I'm starting to think about life in a new way." ❧