**ICanServe Foundation**

**Silver Linings 2019**

**HOW TECHNOLOGY CAN AID YOUR CANCER JOURNEY**

**PICC Room 4**

**SPEAKERS : Dr. Patrick Bugayong**

**: Abby Rosal**

 **: Glenda Resurrecion**

 **: Dr. Ronald Macapindac**

**MODERATORS: Faye of AIDE AC Health**

 **: Paolo Bugayong**

1:51:09 Faye: Hello. There’s still people coming from outside. Welcome. Taga saan po tayo?

Audience: Taguig.

Faye: Taguig City!

Audience: Isabela

Faye: Isabela, wow! Kelan po kayo dumating?

Audience: (inaudible)

Faye: Kagabi pa po. Ok. Si Taguig po, last year pa po sila ngayon lang nakarating (laughs) Congratulations po pala Taguig, ang ganda po ng Patient Navigator model natin. Sana po lahat po ng cities magkaroon niyan. Ok, hintayin lang po natin nang konti yung ibang pwedeng mag join po sa ating session. Maganda po ang ating pag-uusapan today. Pag-uusapan po natin today ay pag ikaw po ay may cancer, ano po ung pwede niyong gawin sa bahay? So, panel discussion po ito. May magshe-share po sa atin na cancer patient, care giver at pano po ang technology makakatulong sa atin. Ok, ngayon na lahat tayo may cellphone, sinong walang cellphone? Ay, hindi ako naniniwala Tita. (laughs) Pero sa bahay niyo meron merong may cellphone? Ok. Sige po, let’s just give maybe 5 more minutes po so we can have more people come in. Wait lang po ah. (Talagang may podium no?) Ok we’ll start.

1:52:32 Faye: Magandang hapon po ulit. Maraming, maraming salamat po sa pagpili niyo sa pag-attend po sa session natin ngayon hapon. Ang session po natin ay handog sa inyo ng Aide, mamaya po i-e-share namin sa inyo kung ano po yung Aide at ng AC Health. So, ako po ay si Faye. Ay huwag po muna natin isara yung door. Just let the door open po. Ako po si Faye. I’m a 2 time cancer survivor. At 2013, I had uterine cercoma. So hindi na ako pwedeng magka anak. Ok, so na-depress ako. Tapos after 5 years, nag healthy-healthy ako. I ran the marathon. Sabi nga ni Doc Francis kanina, nag a-allot ba tayo ng time everyday to be healthy and eat healthy? Yes, ako yun. Pero nagka cancer pa rin ako sa breast. I just finished my chemotherapy this year. So, kaya short hair pa ako. Like some of you guys who are going through cancer, I am also your sister. And I know kung ano ang nararamdaman ng isang pasyente pag nasa bahay. Parang feeling ko, nagugunaw na yung mundo ko pag nararamdaman ko na ung effects ng chemo. Di po ba? Ok. So andito po ako, excited po ako sa inyo kasi may mga ipapakilala po ako sa inyong mga kasama ko sa ating adhikain bilang cancer survivor and cancer fighter and cancer advocate when it comes to technology and home health care. So.. ready na po ba tayo?

Audience: Yes.

Faye: Ay hindi pa sila nakakain. May pagkain pa po sa labas. Sige ulit po natin, ready na po ba tayo?

Audience: Yes!

Faye: Ok. Hindi ko marinig, sorry may bingi ako sa chemo. Ready na po ba tayo?

Audience: Yes!

Faye: Sige pwede na rin. (laughs) Ok. So first introduce ko po ang aking co-moderator for this session, Mr. Paolo Bugayong, ok. (clapping)

1:54:25 Paolo: Hello. Magandang hapon po sa inyong lahat at sa wakas, maraming salamat Manong sa pagsara ng aircon. (laughs) Kasi napaka lamig dito. But thank you again. Should I say a little bit about Aide?

Faye: Yes.

Paolo: Ok, I’m not sure if everyone is familiar with Aide but allow me to also introduce it. We started back in 2016. Yung story po namin dito is that yung lola po namin needed medical attention.

Faye: Ikaw yan (laughs)

Paolo: What a picture. (laughs)

Faye: Picture daw muna.

Patrick: Ang gwapo mo dyan bro.

Paolo: So yung lola po namin had a medical, needed medical attention. And hindi na po siya makalakad. Hindi na rin po siya makaalis ng bahay. And it doesn’t make sense na kukunin pa namin siya, lalagay namin sa kotse and ibabyahe pa kami, punta buong EDSA all the way to Makati Med. And na-imagine na niyo medyo masungit na rin si lola. And during that time, that was also the height of mga technology, mga Uber, mga I guess OLX and other likes, same technology. And naisip namin wala bang parang technology that will actually be very easy to just get a doctor come to the house. And that’s where it all started. My brother and I and along with my other siblings thought of the idea to put up Aide. It’s great because Patrick is also a medical graduate from UST. So at least there is also a doctor part of the organization. It just started there. We had the dream of really making it easy for those that are in need of medical attention. Down to the illnesses to even chronic patients. Then you know, what started with a few requests a day, now it’s already a thousands of request a week. And that’s something that we’ve been proud of. And we could say that through technology we’re making it easier for the Filipino patients and the families. And also that we’re also part of that journey with them, that’s also making them empower themselves to control their illnesses not the other way around. Di ba? So not, so in a touch of a, in a click on your phone, you could have these medical needs right at your doorstep. So we have a doctor on call. We have nursing care. Nursing care is segregated by registered nurses, care givers, even under board nursers. We have physical therapists also. And phlebotomist and even medicine delivery. All these, lahat po ‘to, they will go to your home. Sorry medyo sablay-sablay lang ang Tagalog ko. Pero anyway, they all go right at your doorstep, trying to make it more convenient and easy for you.

1:57:59 Paolo: At the same time, we’re also very proud that we’re giving jobs to the medical professionals, the likes of the caregivers, the nurses and doctors. And they have another avenue to actually serve and earn. Today, we have, I think we’ve reached 3000 medical professionals on board and growing each day. And same for our patients, we’ve already touched 150,000 patients. Now just to wrap this up, for us we just want that when you need help or when you need anything for help, Aide is there for you. So that is our main mission. Right?

1:58:45 Faye: Salamat. So hindi… sino po dito may smart phone? Sinong may Samsung. Sinong may iPhone? Cherry? Huawei? Sino po dito yung may smart phone? Yung smart phone po, siya po yung may mga app. So when we have that, pag meron po tayong nun, pwede po tayong mag download ng Aide. Later po sasabihin namin sa inyo paano kasi meron din po tayong pa raffle. Kaya huwag kayong aalis. Ok? So next ko pong introduce, si Doc Patrick Bugayong. Si Doc Patrick po bibigyan lang kayo ng brief history or yung update lang natin sa tech. Bakit tayo nandito ngayon sa technology ng health care ok.

1:29:21 Dr.Patrick: Yeah, magandang hapon po.

Faye: Magandang hapon din.

Dr. Patrick: Kitang-kita po isa sa mga girls, you’re actually using the video call… someone there.

Faye: Nag fe-face time po ba or…

Dr. Patrick: Face Time ba or video call?

Faye: Facebook live?

Dr. Patrick: Facebook live.

Faye: Nagre-record.

Dr. Patrick: There, you’re the one. There. So I am here. I am the Chief Product Officer of Aide. I’m also in charge of the medical team as well as the marketing team. And I would love to introduce you to what E-health is all about or where technology is going to go to or where it is at today.

Faye: Doc paki define, ano po ang E-health?

2:00:01 Dr. Patrick: So E-health is anything under the sun that… has and encompasses technology. So when technology goes into your medicine or your health, we already consider that as E-health. So there are a lot of facets of E-health like mobile health, M health. There’s under M health, you have tele-medicine, you have tele-dermatology. You have different kinds of E-Health.

2:00:26 Faye: So ibig po bang sabihin pag nag text po ba ako sa isang doctor, E-Health na po bang tawag dun?

Dr. Patrick: That is already, I would consider E-Health if the doctor replies and reciprocates. Any communication, any remote consultation is also considered under M Health. So just to go, just to briefly go through it. So before the 2010’s , ito po yun, this is everything about medicine before, everything about electronic health. So E-Health before 2010 was all about the doctor. Kung kita niyo po yung doctor, yung nasa gitna. And everything that was created before 2010 was to help the doctor help you. So if you see at the very top, nag improve ang laboratories with different equipment. Sa kanan, sa kaliwa, sa kanan niyo po yung mga medical records niyo po naging electronic. Sa baba po, yung mga imaging studies, MRIs, ECGs, EKGs nag improve po yun year by year. And then to your left, mga facilities nag improve, hospitals, clinics started improving. But what we realized, the doctors realized when I graduated in UST 2010 in med school, we started seeing that mali po ito. We forgot that yung nasa gitna dapat ang pasyente. So now E-Health, if you go to the next slide, the patient now is in the center and everything else that I mentioned kanina improved. From the very top, laboratory testing came to you na. May mga rapid test na po. Yes, may mga DNA testing na po na pwedeng sa bahay niyo gawin. Malalaman niyo na po lahat ng risks niyo for every type of cancer in 3 weeks with saliva niyo lang po. Where before you had to go to the hospital and gumawa sila ng equipment na mas malaki pa sa kuwartong ito. Ngayon, saliva niyo na lang po, cotton swab yung panlinis dati ng tenga, ilalagay niyo na lang po sa test tube, malalaman na po natin lahat ng genetics niyo. Everything from anong magandang kainin para sa inyo, kung saan po kayo, kung Filipino ba talaga kayo o may halo po kayong Kastila or German or pwede. So… and then now, we have genetic testing for all types of cancers right at your own home right? So, the electronic records na na-mention ko kanina, ngayon po, dati yung doctor po may hawak ng mga records niyo. Ngayon po, kayo po may hawak ng records niyo. Kayo po yung may control kung sino ang makakakita. Sinong gusto niyo makakita ng records at para alam niyo ano yung kailangan gawin. It empowers the patient to do what they can to help their health. For the bottom, yung mga dating mga EK, mga ECG, yung mga malalaking ano, ngayon mga relo na lang po siya na naka connect na sa smart phone niyo. Na ngayon nakikita ng mga doctor natin na, “Ay tumataas po yung pulse rate na ito. Padala po ako ng nurse sa bahay niyo.”

Faye: Galing.

2:03:33 Dr. Patrick: Tapos yung dating mga hospital, ang pinakamalaking advancement po sa technology is the house. Remote consultation, bringing the doctor to you, having Face Time, mga video calls, chats, hindi na po kayo kailangan everyday pumunta sa doctor. Yung doctor na po ang pupunta dapat sa inyo. Hindi na dapat, tama na yung may sakit na tao, may sakit ang magko-commute papunta sa ospital. Yung paniwala namin sa Aide and paniwala ng lahat ng nag a-advocate ng E-Health, is that dapat yung doctor ang pumunta po sa inyo. So ngayon, we are bringing the house call back. And we call this house call plus. Meron kayong doctor sa house, meron kayong pwede i-chat, meron na kayong mga ano that will guide you through your process. So that is where electronic health is today and hopefully in the future mas gumanda pa po. This is where we are in the Philippines today.

2:04:34 Faye: Ang nakakatuwa dito doc is di ba dati nung bata tayo, yung mga doctor ang pumupunta sa bahay natin. Tatawag yung magulagn natin, “May sakit po yung anak ko.” May doctor tayo sa barrio. Ngayon po kasi nag-iiba na, masyadong tech. Tayo ang lumalapit sa doctor. Pero ngayon yung technology bumabalik po tayo. So thank you very much Doc Patrick para dun sa ating update on tech and health. Ngayon dito naman tayo, pinaka masayang part (laughs). Pinaka masayang part, magse-share po sa atin ang tatlo na mamamayan, tama ba yung term ko? Tatlong indibidwal na may iba-ibang pinagdadaanan. Pero lahat para sa, para kang pinagdadaanan sa cancer. So introduce ko muna ang una. Ang pangalan niya ay si Ms. Glenda Resurrecion. Ay sorry Ms. Abby pala. Ms. Abby Rosal. Ms. Abby pwede po tayong umakyat dito. She is a wife of 2 beautiful daughters. Ay sorry, she’s the wife of Sir Ulysses. Ulysses is a cancer patient and a mother to 2 beautiful daughters. She’s an HR practitioner. So let me welcome Ms. Abby. (clapping)

2:05:51 Abby: Hello, good afternoon. Afternoon. Ok so I was tasked to share my journey with you no? Since we’re talking about technology, I will be using a technology to read my story. So I won’t miss out anything. Alright, so my journey as a caregiver started when my dad had a massive stroke last June 2016. 4 months after his 69th birthday, on 2017 he was diagnosed with advanced N Stage Liver Cancer. After 4 months, he met his creator passing on peacefully surrounded with my family on his death bed. After 3 months, my husband Uly received a call from his surgeon’s clinic asking him to see him as soon as possible to discuss about his surgery and biopsy results. Of the biopsy results of his lymph nodes. Yan. Uly was alone in his clinic a day before our 12th wedding anniversary. It was a Friday. When I came home, Uly was extremely quiet. And I was sharing with him so many stories about how my workshop went. After a while, I asked him how was the meeting with his surgeon went. And he said, “Abby, please be strong. I have cancer.” So I broke down in tears, knees bended on the floor. I cried for 3 days, non stop as tears would just fall down uncontrollably. The next day I called Carla, my cousin who is a doctor to seek help on what to do and to refer some oncologist. Carla gave me a sense of direction. What we will do, what we should do next or what we should do first. She said take one day at a time. The second person I reached out was my coachee who battled breast cancer. Emily inspired me so much with her story that I recall, she was very impressed with her onco. I got the details of her onco, Dr. Farrah from Makati Med. She also invited me to join a community, a small all girls community called Faithful Journey who were composed of cancer patients, survivors and coilers??? Emily was the first one who made me laugh. After reading to her the results, she said “Hodgkin Lymphoma? Sisiw yan.” And the FJ Bible Community, each one welcomed me with their own story and journey of their own cancer battles. Shanty who is an FJ member had the same cancer type as Uly. And she immediately connected with me separately to talk about what to do next which I will be sharing in a bit. The others who help us are our friends who are like family to us. During Uly’s chemo sessions, our friends were always present in the infusion room where Uly takes his cocktails via IV which ususally lasts 4-5 hours. Our friends, high school and college batchmates and his sister, Bambi took turns in visiting Uly to keep him busy by catching up and entertaining him with so many stories and to give him hope. Makati Med allowed our friends to come even if we were too noisy because they saw how much Uly was loved. They even thought Uly was a celebrity or a big time person (laughs). Our high school and college barkada initiated fund raising events for us to help us tide over. And they even paid for Stella, Stella is my daughter right there, they even paid for her tuition fee.

2:09:53 Abby: So let me share with you what worked for us and for me as a caregiver. So with my dad, we had a very good medical team. They’re very empathetic with us. They even gave us so many discounts and I have with me always a ready contact details of ambulatory services in case anything happens. Ok. And we have trained our nannies, yung mga kasama namin sa bahay, to take BPs and to read the oxy, what do you call that? Pulse Oxymeter results to take temperature and log it everyday so we can check the condition of my dad. We also got monthly medical supplies from Bambang, if you’ve heard about Bambang no? Yun ang shopping, shopping mall namin (laughs). And I always surround my dad with his friends and relatives as much as possible. And my kids also play with him when he’s up to it. And then there’s also a fund raising event that they held for my dad. It was a golf event. And we established a routine for him as well. So we play videos of the feast in the morning and then play songs of the Beatles, all the songs of the Beatles, every morning as well. We prayed the rosary, healing prayers every night with my Dad, Uly and the kids and even with the nannies. Every Sunday, I usually bring my dad out in the sun ok. I cut his hair, clean his ears, cut his nails and all that. And of course, we pray the Divine Chaplet Rosary and personal intentions every morning with him before I go to work. Ok, and then, last na. What worked well naman with Uly because this is my next journey as cancer patient din no? So we had a personal touch with our oncologist. I’ve heard so many stories about oncologists who are not very empathetic. But we were very blessed with one. And there’s, for me no? kasi I work also, I was very transparent at work. I told them what will happen. And I’ll have to take leaves. And you know, they’re very compassionate. They allowed me to take a work from home arrangement. So I got paid even if i’m with Uly during the chemo session. Ayun, we did a lot of things like we met a healing priest. You know, we openly talked about our activities in the hospital with our kids. After PET Scan, Uly was not allowed to hang out with our kids. So we isolated him. It’s not because, the kids will get you know, like bacteria it’s because him getting the bacteria from the kids. So that did well, so that he can heal fast after chemo coz there’s a lot of side effects. And then we also allowed him to go on biking before and after chemo. So that he can strengthen his body and perspire a lot. So that it’s very healthy for him and he feels and aside from taking the chemo, we also took, we tried the essential oils as well which really helped him. Yan and then that’s it. We prayed a lot.

2:13:29 Faye: Thank you very much Abby for sharing that very powerful (clapping) story about how you managed to be able to go through that journey with Uly and your kids despite being a working mom. And I understand everybody here has as support group. Importante po ang support group, tama po ba? Ang alam ko yung support group po na… actually kasama po ako sa support group na un, yung Faithful Journey. Ang gamit naming Viber lang, viber lang. isipin niyo po yung mga chat groups natin, Messenger, Viber, nakakatulong po yan. Mga private messages, salamat, salamat.

2:14:06 Faye: Ang atin pong next na panelist is Miss Glenda Resurrecion. (clapping)Ok, si Miss Glenda po is a director, producer. She directed the movie, producer, voice talent, super woman if I may say ok. So hi Ms. Glenda. Here sa center.

2:14:26 Glenda: Good afternoon. Ok let me start. I just wanna share how I survived, iba ang dynamic kapag single person ang na-diagnose kang may cancer. Mag-isa ka lang sa buhay, mag-isa ka sa bahay because one of the first things that I had to struggle with upon hearing my name and the word cancer in the same sentence was hindi ka na makakapag-asawa. Kung hindi ka nakapag asawa ngayon, kumpleto ka ngayon, tatanggalin yung kabila, lalong walang magkaka gusto sa iyo. Tapos because during that time pataas na yung film namin eh. We produced the film, I didn’t direct it, I acted in it. And my name in the film was Abby, so sakto. We showed the film in Malacanang, dun pansin ko ang payat ko na. Sabi ko, “Anong nangyayari?” Sabi ko, “Stress lang ito.” Yun pala bandang January may cancer na. So ang unang sinisi ko yung pelikula namin. Pero ang pinaka matindi kong struggle yung parang mag-isa na lang ako, mamamatay na ako. Papano ako naka survive bilang single person na nakatira sa isang building, kapit bahay so si Faye. Tapos wala kang asawa, wala kang ano, di ba? Parang… pagka sa gabi, pag in pain ka gigisingin, mag-isa ka lang. Ok. Sa lahat po ng mga married na, eto po yung buhay naman namin bilang mga singles na diagnose. Ok pano ako naka survive? Una, kailangan ko ng prayer warriors. Ang hirap po kasi talaga. I studied in a Bible Seminary for 6 years. I graduated with honors pero nothing will prepare you for cancer. No spiritual maturity, no educational attainment, nothing. When it’s cancer, it’s freaking cancer, it’s bad di ba? Parang, minsan nga yung wish ko I hope cancer will get cancer and die di ba (laughs) parang di ba? Parang ubusan na lang eh no? So pano ako naka survive ubusan ng lahi di ba? Ang tawag dito, kailangan ko ng prayer warriors. Talagang they flooded my Facebook messenger with Bible verses. Yun po yung ina-almusal ko kasi ang hirap po talaga. Akala ko nun mamamatay na ako and I didn’t wanna die because my mother already lost a daughter during the 70s. So I don’t want her to bury another daughter. Gusto ko po talagang mabuhay. Kailangan ko nun ng prayer warriors kasi rin po binabangungot ako lagi. Yung mga friends ko po na nagka-cancer, no one ever told me na sila po ay nagkaka-night mares. Nung nag umamin na ako na nagkaka night mares ako, saka lang may sumabi, “Ay yung mommy ko ganito rin. Ako rin ganito rin.” Hinahabol ako ng mga kalansay, hinahabol ako ng mga snakes. Ako, palagi akong iniipit, iba-iba, mga tao, mga animals. So may ganun pala. So I needed people to pray for me. Pagka tulog, binabangungot ako. Pagka gising, nagha-hallucinate ako, walang kawala di ba? Pag gagawa ka ng pelikula tungkol sa cancer, title mo “Walang Kawala” Yan talaga (laughs). Sinusundan ako.

2:17:19 Glenda: Next, I had to be chemo savvy. I was trained to do research when I was working on my masters. Yung professor ko nagte-train sa Harvard, talagang na-torture kami sa research. Nung nagka cancer po ako, nagamit ko yun. Nag research. I had to be chemo savvy kasi po na-realize ko ang cancer is a multi-layer battle. It’s not just physical. I had to deal with a lot of emotional struggles, psychological, spiritual, hindi lang physical. Apat po yun, so may financial pa di ba? Tapos yung PCSO pa. Yung 80 thousand, naging 20. Nung nangyari yun sa PCSO gusto kong manapak di ba? Parang, pag may nakasalubong akong official ng gobyerno sasapakin ko talaga. (laughs) Huwag naman sana itong i-record ha… (laughs) OK, ganun po ang nangyari sa buhay ko. Ok, after po nun, nag che-chemotherapy, ay nag aano din po ako ocean therapy. Ang ocean therapy po ay pupunta ka, pasok po kayo…kayo po yung mga nandito sa labas parang… Ok, ang ocean therapy po ay pupunta ka sa dagat. Uso po ito sa… may water tayo? Hehehe.. ang lamig. Meron po ang, pupunta ka sa dagat, ginagawa po ito sa States para sa mga taong recovering, yung mga returning soldiers na na-trauma, recovering addicts, yung mga sexually abused survivors at yung mga persons with disability. Yun, thank you so much. Commercial lang, commercial… Water therapy. Thank you doc.

2:18:53 Dr. Patrick: Pasok lang po. Hindi po malamig dito.

2:19:01 Glenda: Thank you so much. Ok, yung ocean therapy po, ang ginagawa duon, thank you darling, pupunta ka lang sa ocean, titig ka lang sa dagat tapos wala, naka ganyan. Alam niyo ang ginawa ko dun, lahat na ng issues ko, binring up ko na, yung sama ng loob ko na nagka cancer ako ng single. Ang kamalas-malasan, pag minamalas ka, nag o-ocean therapy ako, may kinasal sa beach (laughs). Wala na talagang kawala. Bad trip! Nandun ako tapos pinicture-an, ang puti-puti, ang ganda-ganda tapos naka black jogging pants, naka black sando tapos kalbo. In fact, pag punta ko dun sa resort, pumunta ako sa CR ang ganda, ang laki ng salamin. Pag pasok kong ganun, “Ay kalbo!” Ay ako pala yun (laughs). Kasi bagong kalbo ako. Ok, so yun po ang gagawin mo sa ocean therapy. Lahat po ng issues ko dun, lahat ng sama ng loob ko, lahat ng mga galit ko sa mga kung sino-sino, nilabas ko na po dun kasi I had to be ready to die. And I have to be ready din to get well. Siyempre pagnaka survive ka sa cancer, ayaw mo na yung mga hang ups mo dati eh bitbit mo din din ab? So sabi ko, “Sige, linisin na natin lahat andito na tayo.” Kapag po nagka cancer, isa po sa sina-suggest kong gawin niyo ay ocean therapy. Kung malayo po kayo sa dagat, kasi ako nagko-commute ako na kalbo, ang bigat ng bag ko. Ang problema lang pag kalbo ka, walang lalapit sa iyong bata (laughs). Akala mo, mukhang addict ka. Di ba? Tapos naka ganun ka pa. Ok. So ocean therapy and then, yung ginawa ko rin po kailangan updated kayo sa mga technology. Yung Aide, naka gamit po kami niyan. Hindi naman ako magaling sa technology. I think naka chat ko pa yung may-ari, yung babae, yung naka usap ko.

Dr. Patrick: Kapatid ko yun.

Glenda: Yung kapatid niyo?

Dr. Patrick: Yung kapatid po namin yun.

Glenda: Sino yun, nakalimutan…

Dr. Patrick: Si Pam.

2:20:49 Glenda: Ayun naku, naka chat ko siya kasi ni-recommend siya. Naka, nakapag contact kami ng nurse. Siya ung nag field wristing sa akin tuwing after ng chemo. So kinontrata ko na yung… sabi ko, “Pwede pa rin bang kontakin kapag ka tapos na yung chemo ko? Collagen naman para bumata kasi nakakabawas ng collagen yang chemo nay an! Nakakainis.” Ok, next, nag post po ako sa Facebook. Kung gusto niyo po akong hanapin sa Facebook Glenda Resureccion. Mga posts ko dun sabi nung mga kamag-anak ng may cancer, “Ganyan pala ang cancer. Akala namin nagda-drama lang si Mommy. Masakit pala talaga.” At isa po, yung mga pinost ko po English and Filipino. Isa po sa mga pinost ko dun nung “Mga Hindi Dapat Gawin sa mga May Cancer”. Isa na don, classic, huwag na huwag iimbitahin ang may cancer para bentahan ng funeral plan. Huwag ninyong iimbitahin sa lunch kasi baka matiyempuhan niyo walang pang chemo yan, mainit ang ulo, yung tinidor na ganyan, isaksak sa inyo, kayo po ang unang makaka-experience sa funeral plan na binebenta niyo. (laughs) Di ba? Ganun lang yun, kasi true story yan. Ok kung ano-ano binebenta sa akin. Kung anik-anik, mga multi-level something, mga network, mga multi-level networking ganyan-ganyan. Tapos pag ayaw mong bilhin, ipapasa sa kalaban. Gusto ko na talagang ihataw sa mukha niya, grabe. So ganun po. Tapos, dito po sa mga pangyayari na ito, sinulat ko po yung journey ko sa Facebook, therapeutic po yun for me. Eto po ang bonus diyan, nakita, ay ganda kong kalbo oh. Para akong rock star di ba? Kulang na lang…

Dr. Patrick: Napaka ganda.

2:22:28 Glenda: Di ba? Ay kaya po ganyan, Joyce Meyer, sa chemo po napaka dilim. May sariing siyang darkness na hindi maintindihan ng iba. After po nung chemo, actually bago pa matapos ung chemo, pumapasok yung blessings. Kaya po nandyan yan, hindi lang po dahil sa message. Isa po sa blessings na pumasok sa akin, siya, yung mga messages ni Joyce Meyer, preacher po siya, ay dina-dub na po sa Filipino, ako po yung official voice. So may website na po yun, hanapin niyo po sa Facebook, ia-announce ko po sa October 1. At unang preaching niya po ay Inggit na struggle ko nung nagka-cancer. Kasi parang umabante ang buhay nilang lahat, naiwan ako. Tapos may mga asawa pa, may mga anak pa, tapos may mga buntis. Tapos yung dating Sunday Schooler namin na-engage nung naka chemo ako. Asar na asar ako di ba? Ok (laughs). Tapos ngayon po, ang isa pa sa blessings sige, abante tayo. Yung may papakita kami. May pinapamigay po ako. Yung… yan! Ang epekto po sa akin ng chemo ganito, sumulat po ako, bago po ito. Gusto ko lang sabihin, yung, yung chemo, yung survival niyan, spiritual, physical, psychological and emotional, sinulat ko po sa iba, sa isang libro, ila-launch sa October. Ok, if you want more information on that, send me your e-mail address on Facebook at ito po ay pinamimigay nang libre. Diyan po sa librong yan, A Voice from the Cocoon, nandiyan po yung iba sa mga pinaka raw confessions ko, yung mga na-discover ko na nakakatakot during chemo na nakaka-enlighten din. At the same time, meron po diyang bonus, “Ano ang Gagawin Pag Na-diagnose Kang may Cancer at Walang Pera?” So hanapin niyo lang po ako sa Facebook, Glenda C. Resurrecion. Send me your email address, I’ll send it to you for free. Ok? Yun lang po.

2:24:18 Dr. Patrick: Wow! Very good. (clapping)

Glenda: Thank you.

Dr. Patrick: A round of applause for the, well 3 lovely ladies, please.

Faye: Very colorful.

Dr. Patrick: Very colorful.

Faye: Color Pink, ok. So thank you very much. Ngayon naman, tatawagin ko yung next natin and last panel member natin. Ang pinagdadaanan naman niya bilang isang doctor. Ok. Doctor, doctor siya to the barrio. Ok, yun yung training niya, general practitioner siya. Pero… siya na yung pag e-explain ko kung ano yung kaniyang mga pinagdaanan. Would like to call Dr. Ronald Macapindac. (clapping) Galing po siyang Pampanga guys!

2:25:01 Dr. Ronald: Hi, hello, good afternoon po. Magandang hapon. So I am here to share pano po ako napunta, napadpad sa home care service from hospital care. So in 2013, I started my hospital service so in an island ok. So sa south po and then, so this is the island, in Marinduque Islands. So… sa MIMAROPA Region. Next slide please. Ok so this is the rural hospital where the district hospital na I serve.

Dr. Patrick: Sorry doc ha… pasara lang ng aircon dito.

Dr. Ronald. Nilalamig.

Dr. Patrick: Kung ok lang, thank you.

2:25:51 Dr. Ronald: Yeah, so next slide please. So this is the emergency room. So that’s where the action is. So I see a lot of, I saw a lot of patients during that time from all walks of life, sa lahat po ng cases. So meron ding mga cancer cases, stroke and kung ano pang pwedeng banggitin. Ok, and then next. So this is the out patient department. So I see ano, I saw everyday cases dun sa Marinduque. So I’m the only, one doctor when I am on duty, nagpapa anak din po ako. (laughs) So, lahat ginagawa. So, so from here ba’t ako napunta sa home care service na I offer now to my patients.

2:26:37 Dr. Ronald: So I was able to serve others but then there’s one person na hindi ko nabibigyan ng panahon, ng sapat na panahon. Sino siya? Ok, so this is my nanay. She was, around that time she was 72. So nakakalimutan natin na tumatanda ang mga magulang natin, habang tayo busy tayo sa ating mga career. Next slide, please. And then without realizing na they also need a companion especially my mom po, my nanay, biyuda na siya. So usually naiiwan siya sa bahay, aso lang yung kasama niya. Ok, so yun po yung kasama niya na before po siya namatay siya yung kasama… nauna po yung aso bago siya, a few months before siya namaalam po.

2:27:29 Dr. Ronald: Next slide. So this one, nakakalimutan natin na kailangan ng kaagapay ng ating mga magulang lalo pag tumatanda. So kailangan po nila ng katabi, lalo na anak na mag-aaruga po sa kanila. Ok, so this was her. This was in Tagaytay. So, nung medyo malapit na po siyang mamaalam, so dinadala namin siya sa mga lugar na pwedeng dalhin para makapag relax. Tapos, until namaalam po siya last year in May 2018, ok. Next please. So… before pa mawala ang mga mahal natin sa buhay, mas maganda po na samahan natin sila sa kanilang journey. Mapa-cancer man yan or ibang sakit. In a way, pare-pareho po ng experience yung pagdadaraanan, iba-iba lang yung porma ng mga sakit. So… pano natin sila sasamahan, ok? Habang may pinagdaraanan sila. May tinatawag na home care. And home care, anong ma o-offer natin sa home care?

2:28:38 Dr. Ronald: Next please. So these are the home care services that we can offer to our patients. Nursing services, physical therapy, occupational therapy, speech therapy, social worker assistance, home care and other services. Next please, so technology has a lot of participation when we do home care especially now there’s an available platform like Aide. Next please. And particularly for the cancer patients, we can incorporate this one to our conventional management which is nutrition therapy, particularly intravenous nutrition therapy. So this is the IV Nutrition Therapy. Actually, ang nanay ko po na-stroke po siya ng mga November 2017. And then for 2 months she stayed sa ICU and then from then on hanggang May sa bahay po siya. Nagkaroon ako ng pagkakataon na alagaan siya, so nag leave po ako sa duty ko sa island. And then, from time to time, I would ano, infuse vitamins sa kaniya pong IV. And nakatulong po siya nang malaki. Ok next please.

2:29:51 Dr. Ronald: So what are the advantages of IV Vitamin Therapy which cancer patients can do in between chemotherapy. Pero you have to be evaluated first by the doctor po kasi dapat po personalized yung management, yung treatment, hindi po basta may cancer pwede po agad i-apply ito. So you have to be evaluated by a doctor who’s trained with IV Nutrition Therapy. So ang avantage po nito is 100% yung absorption niya unlike kapag umiinom po ng oral which is around 55% lang po. So that’s why it is needed. Why do we need supplements? Kasi of course, we can get it naturally from the food we eat. Pero nagdadaanan po tayo sa isang crisis, yung katawan natin. So we cannot really process the food efficiently that’s why we need it. Ok? And then… so sabi nga po ni Mother Theresa, “Love should begin at home.” So kung meron po tayong pagkakataon, ngayon na po yun, huwag na po tayong maghintay na may sakit sila. Pero mas lalo natin silang samahan kapag nasa dapit-hapon na sila ng parte ng kanilang buhay. Yun lamang po.

Faye: Salamat.

Dr. Patrick: Maraming salamat doc! (clapping)

Faye: At tandaan natin lahat tayo umuuwi sa bahay. So pwede tayong, we can hold onto that first.

Dr. Patrick: Yeah.

Faye: Ok.

Dr. Ronald: So sabi nga po nila, home is where our heart is but it is also where our health is. So everything starts at home. Ok, from the food we eat, from the vaccinations administered by, by doctors when we were kids. So those were decided by our parents.

2:31:40 Faye: Ok, salamat Doc Mac. Actually yung first question ko sana kasi matagal ko nang tanungin, gustong tanungin ito kasi maraming mga conflicting ng mga sabihin natin opinion from the medical field, kung ano ba dapat yung pwedeng gawin ng isang cancer patient? Bilang isang cancer patient na nagdadaan sa chemotherapy, pinagdaan ko like Ms. Glenda, nagpapa in between session ako ng Vitamin C. Tinanggap ko ito bilang, hindi siya yung gamot pero pampalakas siya para sa akin. Would you agree?

Dr. Ronald: Ah yes hindi naman po natin dapat alisin yung conventional treatment kasi nakakatulong naman siya. Pero at the same time, siguro sa mga experiences po ng mga cancer patients na nanghihina sila. So kailangan po natin ng supplements pang complement dun sa therapy na ginagawa natin para sa ating karamdaman.

2:32:30 Faye: Sa Vitamin C ba, ano ba yung suggested niyong milligrams?

Dr. Ronald: Ah ok, for the Vitamin C, oral or IV?

Faye: IV.

Dr. Ronald: Ok, parang low tide…

Faye: Low tide, high tide…

Dr. Ronald: Ok for the oral, according to studies for now, it could go as high as to 6 capsules a day. Actually for a normal person, ang advisable na ngayon is 2 grams or apat na capsules na tig-500 na milligrams and then it is higher for a cancer patient. For the IV Therapy naman, what we do is, we do trial first during the first session. And then it increases weekly and then the next session would be according to weight po.

Faye: According to weight.

Dr. Ronald: So, oo… usually around 12 sessions and then you will be evaluated again. If the Vitamin C high dosage therapy is really helpful in your case.

2:33:26 Faye: Ms. Glenda, did you undergo any vitamin therapy during your…

Glenda: Yeah. Actually I started when I graduated na from chemo. Coz I graduated mga July 5. Now I had the first vitamin infusion, about 3 weeks ago. Kasama na dun yung injection here to… kasi they told me na ano, “All your organs are bugged down.” Tapos tinest. Sabi, “The only thing strong in you is your ungs, and yeah your spirit.” Sabi ng doctor, espiritu na lang ako. (laughs) Di ba malapit na akong ma-tegi. So ang tawag dito, kailangan kong mag infusion and then meron siyang acupuncture na kasama. So in one day I had 26 needles, amazing, pero yeah, I wanted to go back kasi meron pa siyang binibigay na mga oral medicine. Very costly eh, oo, very expensive pero I wanted, kung baga isang session, if you will do it all it’s 12 thousand pesos. So medyo mabigat din siya. Oo mabigay din. Homeopathic pero ok yun nakakatulong eh. Di ba?

Faye: Lumakas ka?

2:34:28 Glenda: Ah… hindi ko pa masyadong naramdaman. Ang naramdaman ko lang ang mahal (laughs). Pero alam ko nakakatulong yun di ba? Nakakatulong even kasi hindi naman yun pagka injection sa iyo, Darna! Di ba? Ganun ka kaagad di ba? Little by little kasi yun nga, dumaan ng war. Ito po ang explanation diyan, para pong Marawi, dumaan po ng war, ng matinding gyera ang katawan natin. If you will go to Marawi right now tapos na ang giyera, wala ng mga attacks pero marami pong mga areas ang devastated pa rin at walang gumagalaw because the owners are in other parts of Mindanao at ayaw nilang ipagalaw. So hangga’t hindi nagkakaroon ng rehabilitation and repair, hindi po yun maaayos. Ganun din ang katawan natin. So tapos na po yung war, tapos na yung chemo. Like for me I graduated already. I had 22 cycles pero yung repair kailangan pong magsimula na rin. Di ba? Yun po. So Doc ok lang yung 6 thousand na oral. Kasi may nag regalo sa Mama ko ng ano ng vitamins ang dami.

Faye: Share mo din.

Glenda: So 6 thousand…

2:35:21 Dr. Ronald: Oo better po yun. Siguro para hindi mabigla yung katawan, you can distribute the capsules within the day. Like for every meal, you can take one capsule ayun para hindi mabigla. Ok. And then by the way also, for IV Vitamins Drips it could also be done at home. Ok, especially if, pang ilang sessions na po? Of course still with the supervision of the doctor or the nurse. So they have to know your history. So kung halimbawa po nakaka-stress yung ano, yung pagbi-byahe going to the clinic or to the hospital, so maybe you can request if they offer, I mean offer home service. Like me, I offer po sa Pampanga. Of course, with extra cost lang kasi yung transportation.

Faye: Siyempre yung convenience yun.

Dr. Ronald: Oo, for the convenience of the patient. And minsan po, mabilis makita ung ano, yung effect niya. Like, I have a brain tumor patient. One session lang, the next day, na-regain yung ano, yung energy niya. So case to case basis naman po yun no? So depende sa kondisyon talaga ng, ng tao. And then, of course yung pag inject nun hindi lang po siya basta masasaktan. May mga possible side effects. Pero ma-overcome naman like… kaya dapat po, dapat skilled talaga at experienced yung mag a-administer nung Vitamin C. So hindi po basta-basta saan. Kagaya po ng mga nangyayari ngayon, may mga Vitamin C Glutathione Drips kung saan-saan po. So ang maganda po i-check niyo kung sinong nag a-administer, nurse ba yun, licensed ba, kung ok yung procedure nila, malinis ba, ganun. So dun yun sa mga maintenance naman. Pero sa mga cancer patients talaga, advisable po na you have to be seen first by the doctor.

2:37:11 Faye: Ok. May question lang ako on screening Dr. Patrick. Pag halimbawa po magpapa-screening tayo for halimbawa, any types ng supplementation, meron naman package yan di ba? Meron ba yan? Ano ba, kasi sinabi ni Ms. Glenda, war zone yung katawan natin. Ano ba yung mga dapat na ipapa-test natin?

Dr. Patrick: Yeah, so like… Ms. Glenda said when after a war there should be very comprehensive type of rehabilitation. So we do agree that there are the 4 types that it attacks your psychology, it attacks your physical and mental and emotional health. So packages that are, what I call I think, when it comes to cancer it has to be more personal. When it comes to Dengue or that acute epidemics, it’s more of case to case. But when as a doctor I call it more of a relationship based medicine when it comes to cancer. So the doctor or a platform has to give, provide a full coverage or a full comprehensive package. That goes for nursing, to companionship, from care givers to labs taking your CBCs, making sure your lymphocytes, your WBCs are ok prior to care, pre-chemo and post chemo. Also, mental health like you guys had support groups, having professionals that you can talk to. These are relationship based where it’s more of a conversation rather than a consultation. So screening throughout, there are, there are processes to cancer eh. It’s initial diagnosis. It’s treatment and unfortunately, sometimes it’s also the end stage.

Faye: Palliative.

2:38:58 Dr. Patrick: Yeah palliative. So all troughout there should be that very good rehab, good package that goes along with you through that process, never leaves you. As Ma’am said, when the war ends, that’s actually where everything starts to clear up right? It depends on whether you break down, which is still ok. Or whether you stand back up and get full support somewhere else and help you rehabilitate yourselves. So a good full comprehensive package is what everyone needs.

2:39:42 Paolo: Yeah I think that’s a great point. But I, siguro I just wanna just a simple question lang to my brother also. Na are you… are you a competitor of a hospital?

2:39:50 Dr. Patrick: Ok, so home care I think everyone here has said the benefits of home care. We are an extension of a hospital. So the hospital as, is always and will always be the fore front of medicine. Whatever happens, we are, everything else will revolve around what the hospital can do. A mobile clinic or M health or everything home care is an extension of that fore front. Kung baga, like in the war, they have the tanks, they have the soldiers, they have everything else. Home care is those people just supporting in the background, giving that emotional support, going on giving funds, or trying to help with the donations. Home care should be and will always be your friend while hospital should be your go to for medical care.

2:40:49 Paolo: Great, I, me, I just wanna add also, we have some users, some patients that actually book nurse to come over. And we all know naman mahal naman, mahal din ang nurse service to come over. But what, what we, what the nurses usually do is that they’re able to train the care givers in the house. You know, what will alert them for any situation. How to, how to manage your pills properly. How to, how to go about your daily tasks. So those are also very important. So the nurse is not for 30 days, hindi naman mahal rin kasi yan. The nurse can come in every like every once, every other week. The doctor comes once a month. So, but what we’re trying to do is trying to empower those people at home just like Abigail. Trying to yes?

2:41:43 Abby: Actually the caregivers of dad and the nurses were the ones who trained our nannies to take the BP, to you know, to log everything and for the oxy pulse, oxy meter read. Everything that they know came from the nurses and the caregivers.

2:41:58 Paolo: That’s correct, so parang in a way it’s, it’s ah… tama si doc it’s an extension of the hospital. But also we’re not really replacing the hospital. Because you know if, we were asked one time that are we, can we all do home care? Kami, yung mga pasyente. Am I eligible for home care? And I would always say it really depends on a lot of things because if you’re a high risk of something that may go wrong, it’s always best to be very close to the hospital. The machines are there, the entire staff and the service is there. So it really depends, hindi naman, hindi naman talaga lahat pang, lahat ng home care. Right? I mean…

2:42:42 Faye: Tama. Tama yun. Kami… siguro yung importante ngayon is how convenient or gano kagaan, nakakagaan ng buhay yung technology na meron kang pang “relyebo” sa ospital. Siguro yun yun eh, ire-relyebo mo siya sa ospital. Pero when we connect it to technology no? I just want to ask si Abby, do you have, knowing yung mga convenience nito di ba, siyempre updates yan sa, sa phone or sa website or sa call, ano yung mga concerns mo? Pag halimbawa gumagamit ka ng ganyan technology?

Abby: Ok during the time with Uly no, I didn’t know about Aide yet. But when he had a high grade fever and then plus a cancer patient, it was really ano eh, parang risky. So we had to take him to the emergency room. He was isolated there and we waited for a long time to, to have him seen by an ER doctor. Only to be told, “Sige, you go home and then you come back after 12 hours.” So I was like ok.

Faye: Sayang yung oras.

Abby: So we went back home and then we waited for those hours and then we went back to the ER. Good thing Uly was ano naman, his medicine was able to bring down his fever. But the inconvenience, the... all the cost, all the worry di ba? Parang it was so long for us. So I’m sure that Aide will, if to take lang naman that and to monitor, will be a great convenience for us.

2:44:21 Faye: That’s right. That’s right. Ang… Siguro ang mga question when it comes to using mga 3rd party apps o yung mga convenience apps natin is, how safe is my data? Di ba? How safe is my data? How will I make sure na, the company will protect my data. Ano yung mga ginagawa natin Doc Patrick na ways para at least we can speak of the specific service na mase-safe hold natin, mapo-protektahan natin yung data ng ating mga users?

Dr. Patrick: Yes. So in, just to again reiterate, in Aide I am also the Chief Product Officer so I help develop the app from ground zero. So you, when it comes to 3rd party apps or platforms like Aide, you have to make sure they are reputable. You can always check the terms and conditons and make sure the privacy policy is approved by the National Privacy Commission. Aide has followed the NPC from th every start. And we have the, we made sure that the Data Privacy Act was also placed into Aide. So whatever happens your data is secured. It is safe, don’t worry every, everything we needed to do to make it safe was done times 2.

2:45:43 Faye: Ok thank you very much, nakakaluwag ng loob. Kasi minsan iniisip ko biglang may magte-text sa akin, “Congratulations! You won $1 Million dollar from Prince of Nigera” Di ba?

Dr. Patrick: Sabi nga ni Ms. Glenda di ba yung mga binebentahan ng, yung mga biglang binebentahan…

Faye: Oo, hindi natin kasi alam minsan nagsa-sign up tayo kung saan-saan, yun pala ginagamit na nila yung data natin. So iwasan po natin. Basahin po natin yung terms and agreement, yung fine print po importante yan. Lalo na po mga cancer patients tayo. Ok. Yes? (off mic)

2:46:27 Glenda: Hello, ok, isa po ako sa naka-experience ng services ng Aide. Nung una po ang hirap kasi hindi talaga ako confident gumamit ng mga apps. Pero very helpful po talaga sila even yung owner kaya niya magbigay sa iyo ng instructions. Tapos po wala kaming naging problema sa privacy. Yung sinasabi ni doc kanina na very personal yung service. Yung nurse namin, si Theresa, maganda yung memories namin sa kaniya kasi nagkukuwentuhan pa kami nang matagal na, mas matagal pa yung kuwentuhan namin. So pag darating siya ang, ang ano ko, ang, parang ang pakiramdam magkukuwentuhan lang kami nito tapos ginagamot na niya pala ako. So ganun, saka yung sinabi ni Ms. Abby kanina, yung pupunta ka sa hospital, siyempre after chemo di ba hindi ka na pwede lumabas basta-basta. May mga time pa na umuulan. So di ba? Tapos ang Mama ko senior citizen. ‘Sus magbibitbit yung senior ng anak na may cancer, kalbo pa tapos yung pamasahe. Tapos minsan, pag naka wig ako, siyempre nagwi-wig pag lalabas, mapapa away kami sa pilahan ng PWD, kasi tinatarayan ako. Oh PWD daw siya, PWD daw siya eh. Gusto kong sabihin, “Pupunta ho kami as ospital.” Pinaparinggan. Sinasabi ko na “Breast cancer Stage 3C” pagka pumalag pa sabihini ko, “Halika silipin mo yung tahi ko nang magka ayos tayo.” Di ba? (laughs) parang ang hirap. So lahat ng hassle na yun because may Aide, nagpupunta mismo yung nurse sa bahay. So ang laki po talagang tulong nun sa amin. Yun…

2:47:54 Faye: Salamat.

Dr. Patrick: Same for, for si, si Doc na he was able to sometimes you just have to ask your doctor, “Do you, can you do home service?” Yung mga iba naman pwede eh. Of course, they will charge transportation but it saves you from your travel time plus kung kahit appointment po nasa loob ng 3:30, naku 6:30 yan. Di ba?

Faye: Mahirap pumila kasi kailangan ikaw ang una maglilista tapos pag pila mo ba, 9:00 yung appointment mo kay doctor, 6:30 alam natin yan. 6:30 nasa Cancer Center na ako, nakapila na ako, tapos magsisimba na lang ako… para lang ikaw unang makita ng doctor.

2:48:35 Dr. Patrick: I suggest to add, alam ko lahat po tayo may oncologist. We have our personal relationship with our oncologist. When you, when you do home service, home service is really to help you get through the day. Getting a fever is not a joke. Getting cough and colds is not a joke anymore. So getting a doctor, a specialist like an internist, an internal medicine specialist, a family medicine specialist, a general practitioner. They can take care of those for you, without you having to go to the ER, like ma’am Abby and then being told balik na lang kayo after 12 hours. Because these things, the oncologist won’t need to take care of. These are the things licensed doctors, licensed nurses can guide you through and make you feel better when you’re at home. All we need sometimes is someone to talk to eh, “Doc ok lang ba ako? Ok lang ba itong fever na ito?” Right? Just to ask, I’m the doctor in the family so my brother would always say, “I have a sore throat, what do you think?” It’s like ok, though nothing to worry about. So that’s, that’s all you need to hear sometimes and that’s what home care provides for you.

2:49:47 Dr. Ronald: So bale po hindi po natin pinapalitan yung role ng hospital or yung mga doctor talaga. So what we do we supplement yung mga services na pwedeng gawin na sa bahay. It doesn’t only save ano, your time but also nawawala po yung exposure, sa possible exposure sa mga pathogens na pwedeng mag cause ng pneumonia especially sa mga immune compromised na patients such as the cancer patients who are undergoing chemothepary. So yun yung po isa sa mga advantages ng ano, ng home services that like an Aide can offer.

2:50:23 Faye: Ok, maraming salamat sa ating panelists, isang oras lang kasi yung naka-allot, naka-set.

Dr. Patrick: Wait may phone in question.

Faye: May phone in question.

Dr. Patrick: Kinakabahan na ako, my goodness. Doc, ang question ko ay tungkol sa saliva testing tech. Saan po ito ginagawa at how much it cost? Thank you very much from Marikina Breast Friends.

Faye: Breast Friends…

Dr. Patrick: Ay Marikina Breast Friends.

Faye: Breast Friends…

Dr. Patrick: Ah ok so… genetic testing or the saliva testing is a very new, very modern, we call it predictive care. So before anything happens, babasahin na namin genetics mo para we know already what to target, what you’re ready for. Currently, it is not yet that known here in the Philippines but we will be introducing it next week.

Faye: Woohooo…. I’m so excited!

Dr. Patrick: Make sure that you have an Aide app. It is the first ever in the Philippines that you can book one immediately from an app and the technician will go to your house. The current price range in the Philippines is 50 thousand pesos. In Aide it is 20, 10 thousand to 20 thousand pesos. Full and it is the, it is the most comprehensive DNA Testing so far in the world and we are introducing it next week to the Philippines. So from Marikina, we do service Marikina. We can help you there. We can try, do our best to ano…

Faye: Lalong po tayong….

Dr. Patrick: Hi beautiful girls…

Faye: Ok so ito po, nagsimula po itong si Breast Friends, we love you. May questions po ba tayo sa… nandito sa room? May questions po ba tayo sa ating mga panelists?

Dr. Patrick: We’re also moving to Cebu and Iloilo and hopefully we can launch that by first quarter of next year. (clapping)

2:52:23 Faye: Yes. Yes ma’am.

Q1: Good afternoon po.

Faye: Good afternoon.

Q1: 2 years na po akong ano, na… nag treat, ang sabi po ng doctor ko sa akin, after ng chemo is mag lose na daw po ako ng weight kasi fatty liver na raw po ako. So gusto ko lang sanang itanong since nabanggit niyo kanina na yung gluta is ano, kasi may nabalitaan ako na yung gluta daw eh nakakaganda sa atay. So, ano po ba ang totoo dun sa ano na yun kasi ayoko din namang itanong sa oncologist ko baka hiyawan ako eh. Sabi…

2:53:16 Dr. Ronald: Opo… yeah so about glutathione po, I think established naman po yung ano, yung, yung anong tawag dito, yung role niya sa when it comes to liver. Ang question lang po ngayon is yung mga laboratories niyo, kailangan po i-check muna bago ko i-administer nung, nung IV Vitamins po. So you have to be checked first also. Kung, kung pwede po kayo ganun.

Q1: Quarterly po ang check up ko ngayon. So dina-diagnose naman po lahat nung mga internal organs ko. So pagka nakita po yung result nung aking ano, liver at pu-pwede po ako inject-an ng gluta, pwede po bay un?

Dr. Ronald: Pwede naman po. Opo, pwede na po. Kailangan lang po malaman yung buong history niyo kasi dito hindi natin ma… makuha lahat, yung whole picture no? So… pag po na-evaluate kayo nang maayos, hindi lang po kasi laboratory, pati i-che-check din po kayo ng doctor. Over all po para…

Q1: Yun nga po, may mga tests nga po, may mga lab tests nga po ako kasama po yun. Kaya lang siyempre baka pagka sinabi ko yun sa kanya pagalitan ako.

Dr. Ronald: Oo… oo… kasi…

2:54:27 Faye: Taga saan po sila?

Q1: Nueva Ecija po.

Faye: Mag e-expand din po si Aide dun malapit na….

Dr. Ronald: Pwede niyo rin po ako dalawin sa Pampanga. Magkatabi naman tayo.

Faye: Siguro po ang maganda po diyan is palagi niyo pong, ang, gusto ano po yung gusto po natin gawin maging open lang din tayo sa doctor natin. Para…

Dr. Ronald: Oo, huwag kayong matakot pagalitan ng doctor, pagalitan niyo din po siya. Kayo po ung pasyente dapat sila din po minsan nakikinig sa inyo.

Q1: Marami pong nagbibigay ng vitamins sa akin, tulad ng Omega 3 tapos yung Vitamin B17 which is kulang daw po yung mga cancer na vic- tapos sinasabi nila hindi naman daw po disease, ano Vitamin deficiency lang daw po yung cancer, yung mga ganun po. Kaya um-attend po ako dito para malaman ko po kung ano talaga ang totoo sa cancer.

Faye: Opo, salamat. Salamat po.

Dr. Ronald: Sige po at the end of the day po, pasyente pa rin po yung magde-desisyon kung anong gusto niyang gawin sa karamdaman niya po. Bibigyan lang po kayo ng options ng mga doctor po. So huwag po kayong mahiya na i-open up kung ano yung mga nadi-discover niyo na options. If ever naman po, “Pwede po ba doc na parang supplements in between chemotherapy, pwede po bang gawin ito?” Pwede po kayong mag-usap.

Q1: Sige po sasabihin ko, salamat po. Sabi ko, sabi mo (audience laughs)

Faye: Salamat.

Panelists: (laughs)

Dr. Patrick: Salamat.

Faye: Mag usap po tayo later Tita. Oo… Hi ma’am

2:55:55 Q2: Tanong ko lang kung meron ba itong, itong Aide ba kasi accessible dito sa Manila. Meron ba ito sa ibang region? Like ako taga Tacloban ako, dito lang, pumupunta ako ng Manila para magpagamot.

Dr. Patrick: Ok ah… Well one definitely it’s available in the entire country. However, we have to also make sure that we have the right supply, let’s say in Tacloban. Kailangan meron din kaming doctor na pwedeng gumawa ng on-call dun para sa inyo. But also, we’re also doing a video facility sometime down the road na if we cannot get to you and you just want to talk to a doctor, not through the phone but even you want to see a doctor, pwede niyong kausapin for a few minutes. So that’s something that we’re trying to do para lang maka remote access or text also.

Faye: Alright, maraming salamat and as promised meron po tayong raffle today. Magbibigay po si Aide ng libreng basic health laboratory sa mananalo and tandaan niyo po… si Ms. Glenda is giving away her book about her journey on cancer. It’s for free, hanapin niyo po siya sa Facebook. Glenda Resurrecion and then i-text niyo lang po sa kaniya yung kaniya, ay inyong email address. Ok. Miss Arianne…

Dr. Patrick: Oh pa-raffle na… kumot, kumot! (laughs)

Faye: Sapatos, ayan… Maraming, maraming salamat po Ms. Arianne, we just need the fishbowl.

Dr. Patrick: Ok, who would want to…

Faye: Si Ms. Glenda…

Dr. Patrick: And Ms. Abby…

Faye: And Ms. Abby…

Dr. Patrick: Sabayan na lang.

Faye: Yes, and then before we end picture po. Everybody po pwede po ba tayo mag selfie? Ok wait ha, para kita.

Paolo: Pano kami?

Faye: Sama nga tayong lahat, dito, dito, dito…

Dr. Patrick: Oh pili. Ms. Glenda, Ms. Abby.

Faye: Kailangan po nandito kayo sa room para manalo….

Glenda: And the best actress goes to… (laughs) Elvira Aquino! (clapping) where? Wooh, congratulations! Ok si Elvira, alright.

Faye: One more.

Glenda: One more…

Faye: Hindi ko alam… (laughs)

Dr. Patrick: One lang…

Glenda: Ah wala… sorry…

Faye: Ok. Sige po, teka selfie po tayong lahat… selfie Breast Friends…

Glenda: Marikina Breast Friends…

Faye: Mga Ka-suso… teka lang po, one, two… maraming salamat! Nag-enjoy po kami…

Glenda: Thank you po! (clapping)

**2:59:53 END OF SESSION**

 **END OF TRANSCRIPT**