**ICanServe Foundation**

**Silver Linings 2019**

**Because I Matter: The Survivor Mindset**

**Location: PICC Room 8**

**Speaker: Dr. Joan Rifareal**

**Moderator: Maan Hontiveros**

[01:53:54]

**Moderator**: Gising ba kayo? Okay, hello. My name is Maan Hontiveros and I am privileged to be the facilitator for this very interesting session. How many of us here are breast cancer warriors? How many of us are relatives of breast cancer warriors? This talk is going to be very very important for all of us kasi dito malalaman po natin kung ano ba yung mga iba ibang reaction ng patient as well as the family once may diagnosis ng breast cancer. Dapat malaman natin lahat ito kasi iba iba po ang reaction ng different people and they are all valid. All of these reactions are valid. So kailangan magkaroon tayo ng kaalaman or skills on how to cope with the various reactions of both the patient as well as the caregivers, the non professional caregivers meaning yung pamilya, mga kaibigan. And we are very very lucky to have with us a professional who can answer many of our questions. Our speaker today is a highly motivated psychiatrist driven to provide the highest quality of mental health care to all. She is a diplomate of the Philippine Board of Psychiatry as well as a fellow of the Philippine Psychiatric Association. She served as the chief resident of the Department of Psychiatry and Behavioral Medicine in UP - Philippine General Hospital and finished a clinical fellowship in Consultation Liaison Psychiatry at Tan Tok Seng Hospital in Singapore. She teaches currently at the Ateneo School of Medicine and Public Health helping to train the future health care providers of the country. I'd like you to please welcome Doctor Joan Perez Rifareal.

[Applause]

[01:56:13]

**Speaker**: Thank you very much ma'am Maan and good afternoon po sa lahat, good afternoon. Thank you very much iCanServe Foundation for giving us this opportunity to have this talk at thank you for being here. Nasabi po kanina na this is about more or less, positive no? It's a very positive talk so mamaya, we will see kung how we can help each other. Paano natin tutulungan ang ating sarili at ang ating mga loved ones who are going through difficult time. But gusto ko yung description of ma'am Maan, a warriors. It's a very positive na ano po, it's a very inspiring, uplifting... na description of what we are going through. Very quick lang, personal lang po na sharing. I am also a... I have a family member na may cancer. Siya ang aking dad, mayroon siyang prostate cancer diagnosed two years ago. Like you, like all of us here... kasama ako, doon sa ano natin kung ano man yung pinagdadaanan natin ngayon... ganoon din ako for my father.

[01:57:35]

**Speaker**: Alright. So kamusta po tayong lahat no? How do we feel today? Saan tayo dito? Happy? Ako din I'm so happy to be here, I'm so thankful na nandito tayo ngayon para sa ating sharing. Feel free po tayo to raise your hand anytime. Anytime kung mayroon kayong gustong itanong or iclarify, okay lang. You can interrupt me anytime. Happy... so dito tayo. Mayroon ba dito? Wala... Dito? Okay, so dito tayo happy. Happy. First... titingnan lang natin again, raise of hands. Sino po ang dumadaan, undergoing treatment... as what ma'am Maan said, warriors? [Response] Majority... yes and family members? [Response] Ako din, kasama niyo ako sir. I'm also a member of a family na may cancer. Caregivers? Aside from family... yes, friends, relatives, classmates, neighbors. Tingnan natin mamaya kung ano ba yung definition of caregiver. Friends? Okay nag raise ng kamay. Yes, ma'am Maan. Friends of a patient and doctors. Mayroon pa bang ibang doctor here? Wala. Okay, ito tayo.

[01:59:00]

**Speaker**: Lahat tayo, what is it saying... Hindi tayo alone. Okay? Hindi tayo alone in this journey, lahat tayo be it patients, the family, caregivers, friends, classmates, doctors, lahat tayo tulong tulong and sama sama. So everyone... it affects everyone and cancer affects everyone and we are all here. We work together hand in hand. I was asked kasi kung ano yung title no? Sabi ko "Survivor" kasi yun ang napi-picture ko sa dad ko... he is a survivor. So I looked up the definition, hinanap ko ang definition ng survivor, what is a survivor? A person who endures adversity, mga negative life experiences for example ang diagnosis of a cancer, moves through it... so we do something, we go through it. Perseveres, so hardwork... hardwork in terms of seeking help, treatment. Resilient and remains undefeated. So what do you think? Is this correct? Tama ba ito? Yes... so ako gusto ko lang i highlight, tayo... we remain undefeated. Hindi tayo nagpapatalo. Hindi tayo nagpapatalo. For me this is very powerful. It's a very powerful message, huwag tayo magpatalo and that's why ito yung discussion ngayon.

[02:00:38]

**Speaker**: Ano ang gagawin natin para hindi tayo matatalo and continue tayong fight fight fight? Tama. Very good. Ito lang, brief lang ito... it's a very quick discussion. I'll just give a quick background of cancer in the Philippines. Mayroon kasing study na ginawa a few years back, 2015. Tiningnan lang nila ang financial aspect of cancer in the Philippines. Nakasama po kasi dito ang Veterans Memorial Medical Center. Doon ako ngayon nagwo-work, Monday to Friday as the Training Officer. So nakasama siya dito and ang study na ito, it looked into cost. More of costing no? Yung financial burden which is we admit diba. It's a concern. It's a concern sa lahat ng mga dumadaan ng cancer. Naalala ko noon sa family namin sobrang mahal, sobrang mahal but talagang, kaya nga kanina perseverance. Hardwork, we work for it magtutulungan. Kaya nga I'm so happy na andami natin ngayon, full house tayo kasi tayo tayo din naman ang magtutulungan. Alright? From this study ano ang nakita nila? Breast cancer is the highest type of cancer among the three hospitals, breast cancer. And I was told na ang iServe Foundation is basically for breast cancer ma'am no? Na warriors, survivors and ito lang pinapakita nila the ano nga, the cost ng seeking help for seeking treatment.

[02:02:15]

**Speaker**: Ano ang good, what is the positive result na lumabas from this na breast cancer is the highest type of cancer? Ang lumabas, breast cancer patients in the country had the highest incidence of complete remission. Diba? Yun lang kasi mahaba masyado yung study eh but ito I think, kailangan itong i ano na it has the highest incidence of complete remission. Marami akong kakilala... kasi friends, my age mayroon na kami eh. May mga kaibigan na ako, well nasa remission na. Ako, we continue to hope for the best. Alright. And ang study din, kaya ako tinawag siguro for today kasi may mga ibang discussion na kanina about medications, gamot na iniinom, types, I think marami na no? But I think the reason why ininvite ako today is to talk about the quality of life. Ano ba yung quality of life? Yung kahit na may pinagdadaanan tayo we are still able to feel good. Feel happy. Yun yung important kasi hindi naman yun siya nakukuha sa mga gamot alone for cancer, iba yun. So ang focus natin now is more on the psychological care. Kasi dapat wholistic, so may gamot medical, tayo naman more on the psychology, psychology of care. Kasi they found out yung mga may respiratory cancer... lung cancer for example, they have the highest incidence of anxiety. Laging kinakabahan and depression, labis na pagkalungkot, for those with respiratory cancer like lung cancer. So yun lang yun no? Also because nga may mga caregivers dito, caregiver... let's look at this. Cancer also, mayroon siyang negative effect sa ating mga caregivers. 41% mayroong effect sa caregiver and tumataas ng tumataas ang naaapektuhan na caregiver like family and friends by the end of one year. So kailangan din natin itong marecognize kasi para hindi din natin mapabayaan yung mga tumutulong sa mga patients. Kasi they lost time, nawawalan sila ng oras sa school, sa trabaho like kami before, personally lang... kailangan kong mag leave noon from work para maalagaan ang aming tatay. Okay? So mayroong ganitong effect din on our family. So ito yun... from the study ha? Ito yung from the study na ginawa, ito yung mga psychological consequences. They feel distressed, parang stress na stress na sobrang stress, nadi-distress. Nawawalan ng quality ang kanilang buhay. May fear, takot, denial, depressed, pain... laging pagod, hindi nakakahinga, adjustment disorder. Ito yung wina-watch out namin as mental health professionals, increased risk for suicide in the early stages and timing talaga ito ngayon na may mental health na topic for this month kasi ang September is Suicide Prevention Month. Kaya timing...yes. Suicide Prevention Month ang September and October naman is Mental Health Month kaya i ano natin yun mamaya kung paano natin mapapaganda ang ating psychological well-being.

[02:05:45]

**Speaker**: Alright. So ano ba yung sinabi ni ma'am Maan kanina? Kasi baka lang kasi gusto lang natin na manormalize din kung ano ba yung mga pinagdadaanan natin, di ba ma'am? Kasi hindi naman ibig sabihin na pag nalulungkot, depressed na agad yun. No. Pag may diagnosis, hindi lang cancer... halimbawa ibang sakit, not just cancer... dumadaan din tayo sa normal grieving. Parang may nawala, nalungkot... parang may something na loss, nawala, be it. Tingnan natin ha? Ito, quickly lang... mayroong 5 stages. Dadaanan natin ito mamaya isa isa. Bakit nalulungkot? Bakit parang may nawala? Ang nawala is pwedeng body image, for example... kailangang may tanggalin halimbawa part ng katawan, so mag gi-grieve tayo noon. Ano ba ang Tagalog ng grieve, nagluluksa. Very good, hindi kasi ako Tagalog speaking, I'm Bisaya. Kaya hirap ako, Bisaya ako. Sinong mga Bisaya? [Laughs] Ay ma'am Maan, Bisaya... Ilonggo? I am from Iligan City kaya medyo... ay Iligan sir? Asa dapit? Tibanga pud ko, sa likod sa Redemptorist Church, ah dool ta.

[02:07:15]

**Speaker**: Loss of body image, kaya nagluluksa kasi hindi naman siya about may namatay or may nag passed away ng person. It's more of nawawalan ng body image because of operation or function, function no? So halimbawa kung may nawalang part ng diba? Kung kaunting nagkasugat tayo parang nawawala ang functioning ng, di tayo makakasulat ng maayos, di tayo makakahawak ng maayos. So yun yung pinagluluksaan natin kaya may grieving process. And doon sa pinakita ko kanina, again it's normal. Pwede tayong mag jump from one stage to another and pwedeng iba iba ang pinagdadaanan natin sa ating pagja-jump. But again, i-emphasize lang natin, all of these normal sila. First, quickly lang... denial. Denial, yun yung pinakauna. Kapag mayroong diagnosis, kahit hindi cancer ha. Oo, parang, ay ayokong maniwala. So anong ginagawa ng patient? Kami nun nakailang doctor kami, lipat lipat. Nagtatanong kami, second opinion, third opinion kasi, ay hindi talaga yan tama hindi yan totoo... denial. Ang denial kasi nakakatulong siya. Pini-prepare tayo, okay? Pini-prepare, parang sinasabihan ka na na may cancer pero sige hindi pa yan. Parang pini-prepare ka, slowly. Pini-prepare, alright? Next stage, anger. Nagagalit. Sometimes nagagalit sa amin ha? Kahit kami no, psychiatrist nagagalit. Kasi, ay mali... mali yan doc, hindi ganyan ang nararamdaman ko. Oh parang aawayin din kami no. Anger at God, na Lord bakit ako mabait naman ako? Mabait naman ako, bakit ako? Anger towards doctors, relatives, sometimes bini-blame ang sarili. Dahil ito noon malakas kasi ako mag yosi, ganyan ganyan. So ito yung stage na... another term is protest. Nagpu-protesta. Third stage, bargaining. Ano ang nangyayari sa stage na ito? Nakikipagbargain tayo. Lord hindi na ako magagalit... hindi na ako magsusungit sa aking mga katrabaho, magiging mabait na akong tao, hindi na ako magpaparty party... let me live or let my father live. Bargaining...  so that is a normal reaction. Normal yun. Sometimes we question, we question God, we question our spirituality, it's normal. If only... kung sana noong bata pa ako nakinig ako no, hindi ako nagyoyosi and umiinom ng alak, what if.

[02:10:00]

**Speaker**: Fourth, depression. Again, normal ito ha? Normal... we say it's normal kasi sometimes gusto natin mapag-isa. Ayaw natin tumanggap ng bisita. Ang aking papa noon iritable siya. Ang pagiging iritable, part siya ng depression. Mood kasi siya eh, nagiging iritable madali siyang magalit, kaunting ingay lang. Part yun. Part yun of the normal process ng coping with the cancer diagnosis. And lastly, doon sa lima... pagdadaanan natin yung apat na yun, acceptance. Itong acceptance, ito yung nagkakaroon na tayo ng insight na "ah kaya siguro I am going through these kasi mayroon akong purpose". Kaya siguro ako nagkasakit, baka my body... ang katawan ko sinasabihan ako to slow down, kasi siguro baka sobra na akong workaholic. Kailangan kong mag rest, take time out to heal... to recuperate. Nagkakaroon na tayo ng insight, mga lessons learned na nag i-strengthen ng ating character, nagbi-build ng ating character and wisdom. We learn about the experience. So again process siya... it doesn't mean na pag nandito ka na sa depression, automatic accept ka na. Hindi ah? Kasi nga pwede siyang bumalik balik. Pwedeng anger ka na naman the next day tapos the next day, ide-deny mo na naman. Ay wala talaga akong cancer... so pwede siyang jump jump. It may take some time. Process kasi siya no? Process siya similar to any event na kailangan nating mag cope, process siya and we cannot, walang pwedeng magsabi na ay in one month okay ka na, i accept mo na yung diagnosis. Hindi ganun. It may take some time. But it's a process and look at this no? Very very powerful. I transitioned from devastation, storms... parang magulo, to rebirth and reforestation. This was mentioned by Rosemary Heron who is a breast cancer survivor. Alright, so ito yun. Again it's a process, it's a process na siguro tayo ngayon dito yung iba nasa acceptance phase na, pag minsan naman pag nasa acceptance bumabalik sa anger na naman. It's okay... normal yun. Yun ang gusto kong i ano, it's a normal reaction. Do not worry, it's okay. Okay lang na ma-iritable pero mamaya, titingnan natin kung kailan ba siya hindi na nagiging normal. Alright? May mga red flags tayo mamaya.

[02:12:54]

**Speaker**: Okay, so no one fights alone kasi nga aside from our patients or those who are going through cancer, caregivers din. Tayo, yung mga nag-aalaga be it family, friends, classmates, etc. Workmates, diba? Sa office caregiver din. Sino ang mga caregiver, okay... giving care. Meaning lahat ng nakakatulong. If you are helping a loved one get through treatment in any way, caregivers tayo... in any way. Pwede siyang emotional support, moral support, spiritual support, financial support. Lahat tayo caregivers. So lahat, okay? Caring... so it can be family or friends. Pero kailangan din natin maintindihan, again diba may mga caregivers tayo dito? Ang mga caregivers din they go through some reactions na normal din. Ano kaya? Ano sa tingin natin? Ano ba yung mga reaction ng mga caregiver? Anyone? [Response]. Naiinis, tama. Kasi kanina nga diba, nagmi-miss sila ng work. So tingnan natin... feelings. So it's important na ma-understand din natin ang feelings ng caregiver which are normal. Each is different.

[02:14:22]

**Speaker**: First, sila din dumadaan din sa pagluluksa. Kasi mafi-feel din nila eh na oh no, kung dati kaya namin ni daddy ko mag malling kami buong araw, mawawala na yun, yung capacity na ganun. So pagluluksa pa rin yun kasi mayroon nang mga things na hindi na pwedeng gawin. Okay, so normal yun. Again it's normal. Anger, yung sinabi ni ma'am kanina naiinis. Pagiging iritable, pwede yun. Angry at yourself or family members. Next, pwede din silang malungkot, pwede din. It's the same, kung anong pinagdadaanan ng mga patients sila din dumadaan sa ganun. Sadness. Take note, normal siya but if it's around two weeks or more, mas maganda na may makausap kayo kasi medyo sa ano kasi, clinically two weeks yung binibigay na timeframe para ma observe natin ang mood natin. Guilt... mayroon bang nakakaexperience nito? Yes. Na sana ako na lang, sana ako na lang kasi mas kaya ng body ko. Huwag na ang mother ko... sana ako na lang kasi kaya ko pa, lahat ng mga chemo, gamot, kaya pa ng aking body. Guilt no? Na tayo... na sana tayo ang healthy. Loneliness, sila din nalulungkot naa-isolate sila. Loneliness kasi na a-isolate sila, kasi nga nag aalaga sila so hindi na sila nakakalabas, hindi na sila nakakapagmingle sa kanilang mga friends. So pakiramdam din nila, isolated sila. Ito no, they often feel selfish... kapag minsan diba parang selfish, ay ayoko nga... ayoko na ngayon. Iba naman ang mag alaga. Alone, stressed, irrelevant. Kasi ang question always is kung ako nag-aalaga sa family member ko na may sakit, sino ang mag-aalaga naman sa akin? Oh diba kaya nga dapat we should also be aware na ang caregivers need care. Kailangan din ng care nila.

[02:16:32]

**Speaker**: Alright. So what can we do kasi baka sisignalan na ako ni ma'am. [Laughs] Ay hindi pa, kasi tumayo na si ma'am eh. Okay, what can we do? Ano ang magagawa natin? So patients first... okay let's look at what can patients do. Again, ang importance here is the quality of life. Quality na kahit mayroon tayong pinagdadaanan, psychologically... we remain positive, happy. Why? Studies have shown happiness has some effect on survival. Kaya think positive, yes mayroon siyang effect on longevity, survival and healing and recovery. They say, very powerful ha, from a study... matagal na matagal na na study but it still holds through up to now. Quality of life is the best predicter of prognosis. Kung good prognosis, kung mas maganda, kung mas happy mas positive ang pagtanggap, may acceptance... mas maganda ang prognosis. It's better predicter than tumor size. Kahit na stage 4 basta't maganda ang quality of life, that is good okay? Na we still accept and feel happy and we cope with it. Sir, may seats pa sa harap ha? You can... you can po. Mayroon naman, thank you thank you.

[02:18:05]

**Speaker**: Okay, ano ang makakatulong sa quality of life? Ito na yun ha. Itong mga ipi-present ko ngayon, these are evidence-based. Evidence ha, evidence-based... so scientifically, mayroon itong... backed by studies. Dalawa lang ang kailangan. Dalawa lang... first, back to basics. Eat and sleep. Yun lang, kung may ma carry kayo out paglabas niyo sa room na ito tandaan... eat, sleep. Yun ang very important yun yung dalawa na unang naaaffect kapag nalulungkot ang isang tao. Sleep, hindi nakakatulog or tulog ng tulog, kain, nawawalan ng gana or kain ng kain. Alright, so eat sleep, eat sleep. Sleep, okay... lahat ba tayo nakakakuha ng saktong tulog?

[Response]

[02:19:10]

**Speaker**: Ah, yes. But we do our best no? We do our best na makakatulog. Naps, so okay lang... in fact pag nagtuturo ako class... ay, mga ma'am. [Laughs]. Pag nagtuturo ako kapag ganitong oras ito yung dead hour eh na sinasabi... antok. Hinahayaan ko rin silang matulog kasi nga talagang they need to nap kasi lalo na mga med student sila pero kung may ganoon sila na ano... privilege, may responsibility din sila. Hindi naman puro rights, rights, rights lang diba? May responsibility sila, catch up. Bahala na sila mag catch up kung nakatulog then catch up sila for the quiz or for the exam. Get enough sleep. It varies, usually 4 to 12 hours. Pero what is important? Is it ang number of hours? No. Very good, it's the quality of sleep. Kahit may isang oras lang ang tulog natin basta we feel rested and energetic. Diba? Kapag kulang tayo sa tulog kinabukasan parang iritable tayo? Parang ayaw mo na or mga estudyante, ay parang iritable ayaw na pumasok. Mag a-ano sila no... nabobobo.

[02:20:25]

**Speaker**: Kasi it has... again, evidence based, mayroon siyang effect sa brain function. Bakit ano ba ang ginagawa ng sleep sa brain? It restarts. Parang sina-shutdown niya, nagrerewire siya para fresh in the morning. It has a restorative value, nirerestore niya. It helps with the memory, from short term napupunta sa long term memory, so madaming effects ang sleep. Now, huwag din matakot to ask your doctors kung hirap matulog may mga gamot. Okay, pampatulong sa pagtulog mayroon naman and it's temporary. Kung kailangan, kami, ako personally inaano ko... nirereseta ko kasi diba hindi mo iwiwithhold ang something na nakakatulong, okay? So may mga gamot like diphenhydramine. So mayroon sa market or yung iba naman prescription talaga no so like... may mga ganun na kailangan ng prescription. Diphenhydramine yan siya ma'am Aya... sinabi ko lang yung generic. Diphenhydramine. Alright? So that's ano... it can help.

[02:21:35]

**Speaker**: Next. Eat well. Ano ang mga food na nakakafeel good? Nakakagoodvibes? Chocolates... yes pero not just any chocolate ha? Dark chocolate. Anong percent? 70 or higher huwag yung white chocolate kasi tataba tayo nun. Huwag din yung milk chocolate, it should be dark kasi ang component niya is Tryptophan. When we eat it, nagcoconvert siya into serotonin. Serotonin is yun yung chemical sa brain na bumabagsak kapag tayo ay nalulungkot so tumataas ang serotonin kapag kumakain ng dark chocolate. Ano pa? Bananas are good. Rich din sila in serotonin, avocados are good. Of course green and leafy vegetables. So yun, we eat. Kain huwag malipasan ng gutom... naalala ko lang quickly lang, sa papa ko ang sabi ng urologist niya, tinanong namin "Doc ano po ang pagkain na bawal sa papa ko", kasi nga may cancer. Sabi niya, lahat ng hindi masarap yun yung bawal. [Laughs] Okay. So kain lang ng kain, kami rin sinasabayan namin si daddy kain ng kain. So lahat daw ng hindi masarap, yun yung bawal. Alright diba? Ang ganda ng advice very good talaga yun si doc namin. Siya ang aming urologist for my dad. Si dad ko stage 2... middle ng stage 2 and 3.

[02:23:07]

**Speaker**: Let others help you. Kapag siguro tayo sanay tayo na hindi tayo humihingi ng tulong, nahihiya... this is the time ngayon. Acknowledge natin na ito yung time na kailangan natin humingi ng tulong. Hindi masama yun, let them help us. Kasi it's temporary lang naman hindi naman forever na tutulong and tutulong kasi eventually we will regain our functionality. So let others help you. Next, yun yun... ito yun. Close friends, family, as our source of emotional support and comfort. Okay, think positive no. Instead of thinking kung ano yung mga wala na tayong control, isipin natin kung ano pa yung may control tayo. Yun yung secret doon. Ano pa ba yung at this point, ano pa ba yung may control tayo? For example... bodily functions natin, kaya pa natin kumain mag-isa. Kahit na may diagnosis kaya natin kumain mag-isa, maglakad mag isa, so control. Positive ha namention ito kanina, think positive because mind and body connection. Mind and body connection, kung ano ang iniisip namamanifest physically. So it will result to positive effect. Nakita ko ito sa Facebook, I am stronger than my challenges and my challenges are making me strong. Very positive... I can do it. Dati sa school pinapagalitan ako ng teacher ko pag sinasabi niya, Joan present tomorrow. Sasabihin ko, ma'am I will try. Sabi niya, ay wrong yan... do not try, do it. Diba? Oo nag shift ang aking perspective, oo nga do not try, do it. Kaya mo kasi iba ang effect if you do it.

[02:24:54]

**Speaker**: Next perception, ano ang tingin niyo dito... half, full half? Half full. Okay, yung iba kasi half full ang baso, yung iba half empty. Ano ang sinasabi ng the most positive of all? Hindi. It's full. It's hundred percent full, why? Kasi puno siya. 50% water, 50% air. Yun yung sinasabi ng the most positive of everyone. Ay hindi yan siya half full, punong puno... hundred percent, hangin ang kalahati. Oh diba? Perspective. Okay, perspective. Look at things in a positive manner. Do what you love, kung kaya po kung ano ang gusto niyong gawin... magbasa ba ng libro, manood ng sine, mag malling, magpa ano lang magpa aircon aircon, do it. Kung ano man yung nakakapagpasaya. Si papa ko lagi siyang nagmu-mall, lalakad lakad lang. Di naman siya bumibili, nagpapa aircon lang. Hindi siya bumibili, aircon aircon lang so yun lang gusto niya may mga nakikita kasi siyang tao. May mga nakikita siyang tao hindi siya isolated, hindi siya alone.

[02:26:12]

**Speaker**: Next, helping others. Bilisan ko na daw sabi ni ma'am. Ano ang nangyayari kapag tumutulong tayo? Kahit may pinagdadaanan tayo pero tumutulong din tayo, ano ang nangyayari? Gumaganda din ang pakiramdam natin. It also makes us feel good, nagkakaroon ng purpose and meaning ang ating life. In the brain, mayroon talagang evidence yan. Tumataas ang levels ng... kung kanina serotonin, ito naman dophamine. It's the brain reward system. Kapag mayroon kang ginawang maganda, tumataas ang dophamine sa brain and it makes you feel good. It makes you feel na mayroon kang purpose in life kahit tayo may pinagdadaanan tayo. Laugh hard... laughter pa rin is the best medicine. So kung tatawa tayo, tawa tayo huwag niyong pipigilan. Ganun, so tawa... it's the best medicine pa rin and studies have shown lalo na kapag cancer may mga pain, may mga sakit sakit. Laughing decreases pain. Okay? Promotes relaxation ng muscle, reduce anxiety, mas madami ang muscles kapag nakakunot. Tawa ng tawa. Avoid wrinkles, tawa tawa. Okay? Take care of our spiritual needs. So through finding meaning in our life. Hindi ito about religion ha? It's about finding your purpose in life. Finding your meaning... so ito yung iba no, talk to your priest, spiritual healer, pastor. You can listen to good music. Si papa namin ginawan talaga namin siya ng tape na paulit ulit na puro religious lang no? Kasi nakakatulong din siya, positive positive... huwag lang malungkot.

[02:28:12]

**Speaker**: Talk therapy. Pwede din kayo makipag usap sa mga professionals. It doesn't mean na kung pupunta sa professionals mayroon nang problem ha? Hindi ganun... talking kasi is a way of expression na mas naka-clarify kung ano yung mga iniisip na negative, na mga mali, na mas naka-clarify. Pain management, ako ineemphasize ko ito sa mga patients ko. Kung may pain mahihirapan tayong mag function diba? Ask your doctor for pain medications kung kailangan kasi kung mas na address yung pain ninyo, mas nakaka aid sa recovery. Support group, ito this is a support group diba? Ako I'm happy na mayroong ganito... national. It extends the life, reduces stress, sense of control and positive coping skills. Imagine itong having a support system, mayroong mga pag-aaral talaga at nakikita nila it prolongs life. It prolongs... so maganda ito. Caregivers naman, so battery... caregivers, take care of yourselves too. Huwag pabayaan ang sarili, always kung ano ito... make time for yourselves din. Quick lang ito, analogy, yung sa airplane diba? Kung caregiver ako kasama ko bata, anong sinasabi sa airplane bago mag take off? Maglagay muna ng mask ako, as the caregiver bago ko lagyan ng mask yung bata. Bakit? [Response] Correct, ito yun. Okay? Hindi mo maaalagaan ang ibang tao, ang family member mo, ang tatay mo, ang nanay mo hindi mo maaalagaan kung ikaw mismo hirap din. Hindi mo naaalagaan sarili mo. So that is the analogy here, dati kasi iniisip ko yan bakit uunahin ko sarili ko dapat mauna anak ko. Ah yun pala yun... take care of yourself first kasi kawawa anak mo kung ako wala, diba? So ganun siya. Take care of yourself. Do not take the anger of your loved ones personally. Walang personalan... talagang normal kasi nga yun na iritable, pag minsan wala talaga sa mood. Please let's not take it personally and we remain hopeful.

[02:30:22]

**Speaker**: Caregivers, also ask for help. Pwede maki-relyebo. So ako mayroon akong dalawang kapatid, pag minsan nag rerelyebo kami kasi hindi naman pwedeng ako lang lagi. Kapag minsan doon siya sa kapatid kong kuya, pag minsan sa ate ko pero malayo ate ko, so palit palit kami ng kuya ko ngayon sa pag-aalaga ng tatay namin. Ask for help. Okay, last ito ha... very important ito. So pag minsan kasi naiiwan ang mga bata. Hindi na natin naiisip lalo na kapag may mga anak tayo, parang nawawala sa equation yung mga anak. Let us be honest with them. Nafifeel kasi nila yun, mas maganda yung alam nila kung ano ba talaga ang nangyayari sa atin, sa ating mga magulang, sa mga lolo at lola nila. Huwag silang i leave in the dark kasi matatalino ang mga bata and they also go through similar emotions. Okay? So talk to them, listen, pakinggan ha... try to spend as much time with them kung kaya. Spend time, they need to know the truth. Let us be honest and involve them. Sometimes kasi nakakatulong din sila eh, oh kuha mo ako ng water... ganyan, palitan yung tshirt ni lolo. Alright, so kasi time na... yes ma'am. Okay... together we can. Kaya minadali na ha, rush na ito. Together ha? Tayong lahat, we can. Agree? [Response] We can, okay? Together we can.

[02:31:50]

**Speaker**: Multi-disciplinary always ang cancer management, dito kami pumapasok. So mayroong iba ibang doctor, dietary, social service, group support (ito yun), may medications for pain. Again ha? Pain, ask your doctor for pain medications kung kailangan. Huwag niyong i ano ang pain... titiisin, kasi mayroon talagang powerful pain medications. antidepressant medications kung kailangan and mayroong available antidepressant medications specially pag napansin na natin na two weeks or more tuloy tuloy na malungkot at hindi na nakakafunction. Meaning, ano ba yung hindi na nakakafunction? Like ang caregiver... hindi na nakakapasok sa trabaho kasi sobrang malungkot, wala nang ganang kumain, parang feeling nila hopeless na sila. So may mga antidepressant sa market ang target nila is serotonin in the brain. Tinataas nila ang level ng serotonin no? Like Escitalopram, Fluoxitin, Certralin yun yung mga available ngayon na they are very safe. Kahit na may gamot na iniinom for cancer, nag a undergo ng bracket therapy, chemotherapy, they are safe. Okay? So mayroon yun kaya kung ako, kung nakikita kong kailangan na ng gamot, I give. Kasi again it's temporary, hindi naman siya forever na mag gagamot ng antidepressant. It's temporary habang kailangan lang. And ang depression, mataas ang recovery rate. It's highly treatable kung kailangan siyang gamutin. Kasi kami mayroon kaming screening okay, but wala na tayong time daw. Okay [Laughs]

[02:33:27]

**Speaker**: Alright, bakit kailangan malaman kung may mga anxiety ba tayo or depression? If we see na may anxiety or depression, helpful siya if we are able to address. Kung nagagamot natin, maganda it will help sa adherence, sa therapy. Again, quality of life. Mas maganda ang pakiramdam, huwag matakot humingi... huwag matakot. Kasi very safe ang antidepressants. Ang ano lang nila, ang inaaddress nila is serotonin. Itinataas nila ang serotonin in the brain like yung nakukuha from banana, chocolate, yun. Ito sila mas concentrated sila and nakakatulong sa mood kasi nga, studies have shown mas gumaganda ang recovery and healing process and the quality of life. Okay? Take home points... it is okay, again ha? Kung may kailangang tandaan. It's normal. Normal yun, normal sadness, normal na magiging angry, irritable, it's normal and we can always improve our ability to cope. Again, laughter etcetera. You can do the things na which you make you feel good and happy. Seek help and there is hope. Help is available. Alright? And do not hesitate please, lumapit sa amin... mental health professionals. Kung sa tingin ninyo kailangan na ng talk therapy or kung kailangan na nung medications to boost the serotonin levels in the brain. Alright? Lastly, lastly lang ha to close lang yung kwento ko about my dad... tama yun, actually very powerful yung sinabi ni ma'am Maan, warriors. Alam mo ma'am Maan ako mayroon akong naisip na word for my dad kaya tingin ko si daddy ko ito, what is that word? May makakaano ba? Hula? Conqueror. Conqueror, okay? A victor over enemy. Victor in a way. Yes, victor... panalo, panalo and ako ito yung line ko na iiwan sa atin lahat bago ako mag end. Aside from us being survivors, we are also conquerors. The mere fact na nandito tayo lahat ngayon, it tells us na we are here not just survivors. We are conquerors. Okay? Our fear, our doubts, our anxieties, our sadness, conquer natin sila lahat. So all of us here are conquerors. And with that, thank you very much.

[Applause]

[02:36:26]

**Moderator**: Ang galing galing ni doktora no? I wish I had know new, 15 years ago... noong na diagnose ako but anyway, doktora that's why nag emphasize ako ng word na warrior no? Rather than survivor kasi survivor yung parang victim pa rin tayo nag survive tayo. Diba? Pero kapag warrior ka nilalaban mo yun, you are strong, you are conqueror, fighter, winner ganun. Winner tayong lahat diba? We are all winners. Pero doktora balik tayo doon sa isang question, prepare your questions please we have time for a few. Doktora, sinabi mo diba it's normal for patient to want to be alone. And sabi mo rin two weeks, yan yung arbitrary timeframe no? Pag lumampas sa two weeks, what do you suggest to family members how they can draw out the patient from locking herself up in the room, being alone, being irritable?

[02:37:34]

**Speaker**: Yes. Kaya very important talaga ang role of the family. In fact sa treatment, any treatment... bio, psycho, social, kasama talaga yung social. So family members, ipa feel lang nila yung presence nila. The reassurance na whatever happens they are there to help, to support unconditionally tapos kung kaya nila, isasama sama. Halimbawa dinner, ano lang sama slowly, sama kung lalabas. Kaya ipafeel lang nila na whatever happens, unconditionally the love, support, care is there.

[02:38:12]

**Moderator**: Paano naman if you are a friend and the patient is your friend pero alam mo na nasa denial phase yung pasyente and does not want people to know for instance, ayaw malaman ng iba. How do you handle that? You want to help your friend, you don't want also naman to intrude on the person's privacy diba. So what do you do?

**Speaker**: As a friend, again parang ganun din sa family. Show pa rin, show. The mere presence mo kasi may malaking effect na yun. The mere presence mo na alam nilang may nakikinig, yung they are heard by a friend, by a colleague, by an officemate, that's very good already kasi nafi-feel na nila na they are not alone doon sa journey nila. So communication very important, let them know na oh kung hindi ka pa ready ngayon, sige lang basta kung may mararamdaman ka, if nahihilo or kung may something na kailangan, I am here to help you or kung may load ka sa office na medyo mabigat ngayon, ako muna. Takeover ko muna. One other thing I learned no, in my own journey... kailangan when you are diagnosed with dreaded disease like cancer, dapat maghanap ka ng isang advocate. Isang person na sasama sa iyo when you go to the doctor to take down notes kasi that's one thing that I noticed is that pag ikaw yung pasyente, nagsasalita yung doktor hindi mo maalala at the end of the consultation kung ano talaga yung sinabi niya. So kailangan mayroon kang note taker na kasama mo kasi minsan iba din yun nadidinig mo sa ibang sinasabi ng doktor. Always yun sana kung may consultation ang ating mga loved ones, samahan natin and mas maganda kung may journal. Sinasabihan ko rin yung mga patients under my care, journal para walang nakakalimutan at narerecord din doon kung ano ang feelings, ano ang mga iniisip para ma correct kung may mga medyo negative.

[02:40:19]

**Moderator**: Okay, we are open for questions. I'm sure marami tayong questions diyan. Although very comprehensive talaga yung presentation ni doktora. Any questions? Your chance to ask now. Wala? Oh mayroon pa akong isa. For... as caregivers and friends also, aside from the tips that you brought in there, how do you manage the patient na sometimes they've be very negative, they become brats, they become bullies and they become sometimes very mean? So how do you cope with that as a caregiver, as a family member?

[02:40:57]

**Speaker**: Kaya that's why kanina no kasi nga it can be a normal reaction ma'am no?

**Moderator**: Pero when it gets to the point when they are already mean to other family members, what do you do?.

**Speaker**: Kapag ganun, time out ka muna para it doesn't din affect you. So dapat may awareness din na up to this level lang ang kaya ko. Kapag ganun, ay sige tawag ka muna ng kapatid mo or another relative to help out. Kasi nga huwag mong pabayaan din ang sarili mo. Protect din, protect yourself na ma ano kayo, ma burn out... na kayo din malulungkot. Kapag ganun, share... share the responsibility, ask for help. Huwag mahiya to ask for help kasi I'm sure madami naman kaya nga support system siya. Madami naman tayong pwedeng magtutulong-tulungan.

**Moderator**: Doktora itong mindset na you show the glass na half empty, half full... diba some people are naturally optimists? Others are naturally pessimists? At saka I've been told and I read in books that a lot of this is genetic and hereditary, pero can it be learned? Can optimism be learned?

[02:42:14]

**Speaker**: Yes. Kaya siya part of it is personality. Kapag personality kasi meaning, since bata pa yun na yung naki-carry natin na way of thinking. Ang personality natin yung iba shy, yung iba ano sila bibo... yung iba extrovert, introvert... personality trait siya. It's a trait but we can improve on it. Pwede siyang i-adjust, i adapt and improve on it especially nga if through ano no, through modeling. For example nakikita nila sa mga kaibigan nila or family na ay parang happy happy siya lagi... so nalilearn din nila yun na it's a better way of coping.

**Moderator**: Would you go to a psychiatrist, psychologist, the counsellor for that?

[02:43:00]

**Speaker**: Ako hindi ko naman ma'am... kung talagang it's something na it can be helpful for the caregiver or the patient, ako ang suggestion ko start from pinakamalapit sa community. For example, kung mayroon sa school... mayroong guidance counsellor, then they can go. Kung sa workplace naman kung mayroon silang company physician, then they can go there and ask for help and support. Psychiatrists are always there yun nga lang kaunti lang kami. Kaunti lang kaya we need... maganda itong ganito, kasi with this atleast maisishare natin din sa iba kung ano yung makakatulong in our recovery.

**Moderator**: Doktora, I know you're... there's a question there, please.

**Question #1**: Hello good afternoon po. I have this nagging in my mind already for since I was diagnosed last year. So everytime somebody dies from cancer, I have this nagging fear and anxiety. Like, what is the best thing that you can tell yourself how to deal with it because... let's face it diba, malungkot kapag nalalaman natin na mayroong namamatay with the same disease that we have. So it's really a nagging question in our mind, you know...

[02:44:22]

**Speaker**: Correct, oo. Thank you for that question. I agree, talagang when we hear of mga ganitong kwento or stories or incidents, talagang it can affect us. Normal yun, normal... that's part of a normal reaction na we feel anxious, kapag ganun... then again, be there. The mere presence kasi and as much as we can, i-feel din natin kung ano yung pinagdaanan ng ating mga relatives or loved ones who are going through this difficult situation, normal yun but kung ganun and we have this anxiety, pwede naman na we be proactive also. Kung halimbawa mataas talaga ang the genetics na component, diba parang sometimes nagkasunod sunod in the family, have ourselves checked din to ease, lessen the anxiety. So mayroon ding degree siya of being proactive. We take good care of ourselves. Hindi ko pala namention kanina, exercise is very important. Kasama yun kasi it will help lessen anxiety, nagri-release siya ng endorphin kapag pinagpapawisan. Exercise helps lessen anxiety, endorphins are the natural happy hormones. Napansin niyo ba yun kapag nag e-exercise parang feel good tapos maganda ang tulog sa gabi and mas maganda. It makes us feel na parang relaxed and calm. Thank you.

**Moderator**: I saw another hand raised here somewhere. Any questions?

[Silence]

[02:46:06]

**Moderator**: Well I think we have covered a lot. So in behalf of everyone, I would like to thank Doctor Joan Perez Refarial. Saan po kayo maco-contact in case we need your professional help?

**Speaker**: Oh yeah, sa Veterans... Veterans Memorial Medical Center Monday to Friday pero I have my own clinic sa UP Village. Sa Facebook, isisearch lang Healthy Mind Clinic. That's me... I will answer. Ako ang tagasagot din sa mga calls kasi dala dala ko lagi yung cellphone. Kaya kahit sa name ng clinic, very positive. It's positive, healthy... healthy mind for all.

**Moderator**: Well maraming salamat in behalf of all of us, warriors, family and caregivers and friends.

[Applause]

[02:47:07]

[END OF TRANSCRIPTION]