



The Importance of Living Well with Cancer

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Andrew Schorr:

Hello and welcome to Patient Power. I'm Andrew Schorr. As new drugs come out for many of the lymphomas, and also the illness I have, CLL, chronic lymphocytic leukemia, they're generally less toxic. You can live with the cancer and live pretty well.

But you also want to beat the cancer, and that's where the whole discussion about quality of life comes in. Living well, but also fighting the cancer effectively. That's the heart of our discussion, as we rejoin the four experts at the roundtable at the 12th Annual International Workshop on Non-Hodgkin's Lymphoma.

Dr. Gribben:

So, potentially, then, these agents have a, a big impact on potential quality of life for our patients. How important is that when we're thinking about these new agents?

Dr. Rubenstein:

I talk about that with my patients almost as much as I talk about survival. It's very important for my, our patients to, to be able to enjoy their, their, their time, and the, the, the extent of their lives, and not have the disease, or even worse, the treatment impact the quality of their life.

So it's, it's very important and encouraging that many of these biologic agents that we're discussing have that potential to keep people ambulatory, independent, enjoying excellent quality of life and, and having fewer disease-related symptoms at the same time.

Dr. Wilson:

I think it's very important that patients not put drugs into a chemotherapy bin and, and non-chemotherapy bin because if you look at drugs like lenalidomide (Revlimid), they're every bit as toxic as chemotherapy and, in fact, may be more toxic than numbers of drugs. And so I think that this is a, an artificial construct.

And that what we need to do is think about what the best combinations are; the optimal combinations to give us the end product that leads to the longest duration of survival with very good quality of life. So to bring up quality of life is absolutely key.

Dr. Gribben:

Okay, one-word answers. Jeremy?

Dr. Abramson:

Cure, control. Both

Dr. Gribben:

James?

Dr. Rubenstein:

Cure.

Dr. Gribben:

Wyndham?

Dr. Wilson:

Cure is optimal. Control if you can't cure.

Dr. Gribben:

Okay.

Andrew Schorr:

Sure, we want to cure our cancer, but for some of us, it may acceptable, at least for now, to live with it, if we can live well. But eventually, you want to see, is there something better coming along that can end it once and for all in your body? And that's where clinical trials may come in.

So we'll discuss clinical trials in-depth in our final segment from a roundtable from the International Workshop on Non-Hodgkin's lymphoma. I'm Andrew Schorr. Remember, knowledge can be the best medicine of all.

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