



# Patient Power

## What Are the Key Steps to Early Cancer Detection?

**Tricia Laursen**  
Executive Director  
15-40 Connection

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**Andrew Schorr:**

Hello and welcome to Patient Power. I'm Andrew Schorr today in sunny La Jolla, Southern California near the Pacific. And we have a special guest with us, and that is Tricia Laursen who joins us from the Atlantic in Westborough, Massachusetts, not too far from Boston. Tricia, thanks for being with us.

**Tricia Laursen:**

My pleasure. Thanks for having me.

**Andrew Schorr:**

So, Tricia, you're the Executive Director of the 15-40 Connection. What is that all about? What's its mission? What is it?

**Tricia Laursen:**

Yeah, 15-40 Connection, we're a nonprofit organization, and the simple way to tell you what we do is we save lives by teaching people how to detect cancer early.

**Andrew Schorr:**

Well said, okay. So let's think of younger people for a second. There are younger people who develop cancer, but often it's not caught—whether it's breast cancer, Hodgkin lymphoma, we have some people with leukemia, lung cancer, others, and then it ends up being even a deadly diagnosis or treatment much more toxic. So it really can make a difference. Tell us some stories about how it can make a difference.

**Tricia Laursen:**

Yeah. You know, one of the things, when you think about cancer diagnosis and treatment, one of the things we don't often talk about as a culture is cancer symptoms. So we'll ask people, would you recognize a cancer symptom, and it's usually not a question they've ever thought about. But if you diagnose your cancer early, like you said, your survival rates are dramatically higher than if you diagnose it late, say at stage III or stage IV.

So we have a lot of people that use what we call our 3 Steps Detect to help them recognize some of the subtle and persistent symptoms of cancer. They're the things that may not be alarming to you, may not or they won't typically cause you to go to the emergency room, but they know that they need to get checked.

The first woman who thanked us for saving her life, her name is Kaitlin, right? She was in her late 20s, and she had been on our website, learned all about 3 Steps, and learned about the importance of knowing what's normal for your health and just

monitoring change without becoming obsessed by it. Well, she, fast-forward six to nine months found a lump in her breast, and she knew it hadn't been there before.

So Kaitlin hadn't been to her doctor, her primary care, in six years, but she noticed this change. So she called the doctor the next day and said, listen, I have a lump in my breast. I'm afraid it might be cancer. I need to be seen. And, you know, like any physician who hadn't seen a patient in six years, there's a long waiting list to get in, and they gave her an appointment in three weeks.

And she said, no, I need to be seen today, and they explained, I'm sorry, we don't have time. But you know, cancellations, we'll let you know. Well, what she did is she went down, and she waited in the doctor's office until they would see her that morning. So midday she got in, and the doctor at first didn't find the lump, so rather than take the oh, phew, get out of jail free card, right? If the doctor can't find it, must not be there. She pointed it out.

And the doctor then felt it and said, you know what? You're young, lumpy breasts aren't uncommon. Let's give it six months and if it changes, we'll do something then. But Kaitlin knew her normal. She knew it hadn't been there before, so she knew it was a change, so she said I know this is different. If it was six months later and it had changed, what would you do? And she said, well, we'd do an ultrasound, but I really don't think you need it right now. And she said I'd really like the ultrasound. And so she advocated for herself.

She went out to schedule the ultrasound, and I call this a little bit of divine intervention or serendipity, but they didn't have an appointment for the ultrasound for another three weeks. But as she was scheduling, somebody must have called in and cancelled, and on the schedule a spot opened up that afternoon. So, long story short, she went, the results were suspicious, two days later she had a biopsy. It was cancer.

When she went to meet with her team, so her oncologist and her surgeon to be—they congratulated her. You don't expect to be congratulated for getting cancer, but what they were saying is you did everything right. With the type of breast cancer you have, three weeks later you could have been a stage II and possibly a stage III. You just helped save your life.

**Andrew Schorr:**

Wow.

**Tricia Laursen:**

So those are the things that happen when you know what to look for and how to collaborate with healthcare professionals and trust yourself.

**Andrew Schorr:**

So let's talk about your tests, the three steps, because, first of all, young people think that they're invincible. I have three 20-somethings, and, you know, stuff comes and goes, but they're going to live forever, they often don't like going to the doctor, may not even have a doctor.

**Tricia Laursen:**

Correct.

**Andrew Schorr:**

So give us those three steps particularly for people, younger age, who are not used to going to the doctor and think they'll live forever.

**Tricia Laursen:**

Right. Younger people do think they're invincible, but why wouldn't they? They've always gotten better in the past, right? Why wouldn't they get better in the future? But cancer can be a sneaky disease as can some other diseases.

So our 3 Steps Detect, the first step is what we call it know your great. On your best days, how do you feel, right? And make either a strong mental note of that, put notes in your phone, maybe take pictures of a mole so that you have that

accessible so if that starts to change you don't say things to yourself like, geez, have I always felt this way? Really tune in to what's normal for you.

So think about lumps and bumps like we've talked about, but energy level and bowel habits and sleeping and your weight changes. You know, if you're gaining or losing weight, you don't know why, you know, why would that be going on, right? And really tune in to that and make a mental note.

Two, we call it the two-week rule, really easy to remember. So, say, for instance, you have an energy level change, right? And you're usually somebody that can go 18 hours a day, no problem. Of course, a little tired at the end of the day, but next day you do the same thing. You know that feeling when you gained the flu, and your energy level just kind of decelerates a lot, and you need a lot more sleep? What if you have that for a week-and-a-half, two weeks? Are you going to go to Starbucks or in Boston we go to Dunkin' Donuts and get more caffeine, or are you going to call your doctor?

And with the two-week rule, what we're saying to you is your job is as a patient is to call your doctor. By the way, we interview primary care physicians. That's when they want to see you. You're not bothering them. That's the right time to go. So don't feel like you're wasting their time.

Then the third step is, really easy to understand but it's hard for a lot of people to do, and that is share with your doctor, right? So when you get there—imagine yourself in the exam room. Do you ever think that your doctor kind of has this magic X-ray vision? We know he or she doesn't, but at some level they'll know what's wrong, right? Think of your doctor as a detective, right? To solve the mystery the more clues the doctor has the more likely you're going to get to an accurate diagnosis and effective treatment faster.

So the more info you can provide, and I know some of it's embarrassing. You may be talking about body parts you don't want to talk about, but as a patient your job is to share and collaborate with your doctor. You two are a team. So that is a quick overview of three steps.

**Andrew Schorr:**

Great advice. I just want to mention because I've interviewed thousands of patients over the years and some younger, certainly about fatigue you mentioned and some of the blood cancers we deal with, Hodgkin lymphoma, people just dead tired and they don't know why and it goes on. You've got to look at that.

**Tricia Laursen:**

You need to do something, yeah.

**Andrew Schorr:**

Yes. It could be you're studying too hard or not getting enough sleep or whatever.

**Tricia Laursen:**

Right.

**Andrew Schorr:**

But if it persists, that.

And the other point I was going to make, Tricia, and I'm sure you'll agree, we're in this stage of personalized medicine. And so when we start talking about cancer we're also learning about genomic subtypes of which there are different treatments. And so sometimes early on it's really important to get a comprehensive test so you and your doctor, the detective, know if you're dealing with a cancer which cancer type so you get the right treatment, right on the front end. Wouldn't you agree?

**Tricia Laursen:**

Exactly. Very important. And that's all about working with your doctor, you know. You both bring different types of expertise to the relationship, and you're both very important, so that's great advice.

**Andrew Schorr:**

Okay. So somebody goes to the doctor. The doctor says, well, you're 20 or 30 or 35, or whatever it may be, or you're a teenager, whatever it may be, and say you know what? It's very unlikely this is a bad thing. Well, so you don't want to be worried, but how do you push to say, well, how do we get a complete picture, or what should I be looking for?

**Tricia Laursen:**

Right. And keep in mind it is unlikely to be cancer, right? That's not what's going to happen the majority of time. It could be a whole host of other things, but you need to know what it is. So if you're really doing a good job at step one, like Kaitlin did in the story I just described, you're going to know that you're normal has changed, and you have to do a good job of really making sure your physician is aware that that's already changed, right? So wait and watch, maybe you've already done that.

And then we always advise questions like, okay, if you think I should wait—and say fatigue is the problem, right? Ask the doctor, when should I feel better, and what should I do if I don't? Because we'll run into people that will go on with the fatigue for six-plus months. That's way too long, right? Maybe you give it another two weeks, and then you go back, and you move onto the next step.

But it's really about trusting your gut instinct. A lot of us have really good instincts. Trust what you know about yourself. It's really valuable information.

**Andrew Schorr:**

Okay. So what resources are they, that which we can tell people about, like your foundation, so that they can really dig into this some more to make sure for them or someone in their family can have this radar so that cancer early detection can be part of our lives?

**Tricia Laursen:**

Yes. I would advise them, check out our website and review the three steps. It's 15, the number 15-40.org. And also read. We have a lot of cancer patients who have shared their stories. And it's in our Learn From Me section, and you can read about their experiences and what their early symptoms were, what they thought about them at the time and also about their interactions with their doctors. Some were very good and some not so much, and how they overcame them.

And you'll also see some information on how people really once they've been diagnosed with cancer, as I know a lot of your audience knows, you really deal with your doctor in a different way. You do become a better advocate most of the time. So you can read about that as well. But the big thing is really to share. We need people, we need this—your awareness of yourself and the important role that you play as a patient and the information you share with your doctor has to be part of our cultural norm of how we interact with our care partners, right? You can't undervalue what the patient brings to their relationship.

**Andrew Schorr:**

Right. And we, the patients, we're the ones living with it, and we're the ones whose life is on the line, literally, with cancer, so if we don't speak up for ourselves or for our loved one, if we're a caregiver who really has more at stake.

**Tricia Laursen:**

Right.

**Andrew Schorr:**

So this, as we sum up, Tricia, this is not trivial. This is, can be lifesaving or life-extending.

**Tricia Laursen:**

And it's done both many times for us, so that's why our goal is just to spread this to everybody in our country so everybody knows how to do this, and then our job is done. We're not here to build a huge organization. We just—everybody deserves the lifesaving benefit of early cancer detection whenever possible, and that's what we want to give to everybody.

**Andrew Schorr:**

Okay. Well, I want to congratulate you on what you do. Tricia Laursen with the 15-40 Connection based out of Massachusetts. Delighted to bring this message to our audience. And it's a message not just for those of us living with cancer but for our families so that knowing unfortunately the incidence of cancer is way too high and it happens to people of all ages, let's be on the lookout for it and take action when there's reason for concern and recognize those concerns.

Did I get it right, Tricia?

**Tricia Laursen:**

You got right. That's excellent, yes.

**Andrew Schorr:**

Thank you for joining us, Tricia, from Westborough, Massachusetts. Andrew Schorr here in California reminding all of us that knowledge can be the best medicine of all.

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