

# THE BUFFALO NEWS

MONDAY, NOVEMBER 3, 2008

## FOCUS: BATTLING CANCER

### Health coaches talk patients through the toughest moments

*Empathy and education support those overwhelmed by cancer or chronic illnesses*

BY HENRY L. DAVIS

NEWS MEDICAL REPORTER

After the cancer diagnosis came the panic.

No matter how much she tried to remain upbeat, no matter how much encouragement she received from family, Patience Verhague at times found herself overwhelmed by fears of pain and death.

She needed someone to talk to, someone outside her normal circle, someone who had been through what she was about to experience. So, like a growing number of patients with cancer and other chronic illnesses, she turned to a coach.

"You need to know that you can make it to the other side," said Verhague, who has undergone 42 chemotherapy sessions for ovarian cancer and will soon have surgery.



Health coach Barbara Bartle, right, a cancer survivor, meets with Pat B., a woman she is advising.

Harry Scull Jr. / Buffalo News

Her coach, Barbara Bartle, has talked Verhague through the toughest moments, having been there, done that.

"You can feel sorry for yourself. I did. I cried a lot. But it doesn't

help," said Bartle, who underwent chemotherapy and a hysterectomy for ovarian cancer in 1989.

Medical care tends to focus on treating disease and its physical effects. Emotional problems often go untreated, either because physicians don't recognize them or because patients are too embarrassed to talk about their concerns.

Yet there is evidence that without adequate support, such problems as depression, anxiety, insomnia and fatigue can undermine a patient's wellbeing and ability to recover.

Also, medicine in general is more complex than ever. Patients need help understanding their illnesses,

navigating the health system, making decisions and struggling with financial issues related to their illnesses.

All of which has given rise to the health coach.

#### Insurers jumping on idea

Verhague relies on a cancer coach program from Buffalo's Cancer Wellness Center that started seven years ago with one volunteer. Today, the program works with nearly 100 volunteer coaches—all of them cancer survivors—and responds to requests for help from around the world.

Health insurers have jumped on the idea, as well. HealthNow New York, the parent company of Blue-Cross BlueShield of Western New York, two years ago touted itself as the nation's first health insurance plan to offer a health advocacy service as a standard feature for its members.

The idea was to offer members an expert who would be available by telephone and who knows the ins and outs of health care and insurance. Other insurers are now doing the same.

"People need help with the increasing complexity of disease and the huge amount of inaccurate information available over the Internet and elsewhere," said Dr. Jay Pomerantz, senior vice president and chief medical officer of BlueCross BlueShield. Patients often are too embarrassed to call back doctors with the questions."

Patients willing to pay for support and advice also can find an assortment of coaches and advocates who sell their services on the Internet.

For instance, Rosalind Joffe, a Newton, Mass., career coach, has carved out a subspecialty at [cicoach.com](http://cicoach.com) aimed at helping patients balance chronic illness with their work.

"Many professional people with chronic illnesses are reluctant to tell their employers," she said. "They continue working under the radar, yet they are in an environment that expects them to be 'on' 24/7. They struggle with demands of the workplace, the expectation of their co-workers and the needs of their body."

Last year, a major report from the Institute of Medicine that focused on cancer care confirmed what many in the patient-support community already knew—the health care system is failing to address basic psychological and social issues affecting patients.

“Americans place a high premium on new technologies to solve our health care needs. However, technology alone is not enough. Health is determined not just by biological processes but by people’s emotions, behaviors and social relationships,” the report concluded.

The report went further, documenting research showing that psychological and social problems can prevent patients from complying with treatment plans and managing their illnesses. It also proposed a new standard of care in which doctors routinely screened patients for distress and referred them for help.

### **Support without a group**

It was with that gap in mind that Hillary Ruchlin, executive director of the Cancer Wellness Center, started her group’s coach program.

“Over the years, we found that a lot of patients didn’t want to join support groups but did want some form of support,” she said. “All you need to do is see a patient and coach meet for the first time to see that it’s often a profound moment.”

Verhague, a Lewiston real estate agent, turned to the program soon after her diagnosis in late 2005.

Ovarian cancer begins in the ovaries. It is the fifth-leading cause of cancer death in women, and the American Cancer Society estimates that about 15,280 women will die this year because of the disease.

Chances of surviving ovarian cancer are better if the cancer is found early. But the disease is difficult to detect in its early stage, with only about 20 percent of ovarian cancers found before tumor growth has spread beyond the ovaries.

Verhague describes herself as an upbeat person with a supportive husband and adult son. But the disease at times left her feeling like a burden or yearning to share thoughts with someone who understood more deeply what she was going through.

She hooked up with Bartle early on, and the two talked on the telephone whenever Verhague felt the need.

As she progressed through surgery and chemotherapy, the stress, pain and fear grew, especially as she lost her hair. There were complications and infections. Cancer therapies kill tumors but can also cause debilitating side

effects. Verhague spent days exhausted no matter how much she slept.

“Every once in a while the fear of dying just grips you out of the blue,” she said.

It was 1½ years of telephone chats between coach and patient before the two met for lunch on a day Verhague traveled to Buffalo for an appointment at Roswell Park Cancer Institute.

If anyone was made for positive thinking, it is Bartle, a retired executive secretary from Cheektowaga who brings to the coach program an outgoing personality—despite her own health problems.

In the years shortly before her own diagnosis, Bartle’s mother, father and uncle all died of cancer.

“I thought I was going to be in the ground in no time,” she said. “Now, I tell people to ignore the statistics. If the statistics were always right, I wouldn’t be here.”

She joined the coach program in 2003, as a way to give back after surviving the disease.

“I do the best I can to give people encouragement and hope. It’s just about being a compassionate person,” Bartle said.

### **Improving health literacy**

There is more to health coaching and advocacy than emotional support.

Many patients have difficulty understanding health information and, as a result, struggle making good medical decisions. One of the key reasons BlueCross BlueShield started its program, which is a partnership with a call-in center operated by Health Advocate Inc., was as a response to growing concern about patients’ health literacy.

“We’ve learned that the health care system is more confusing than we thought it was, and people need help making decisions,” Pomerantz said.

The fact that physician reimbursement has rewarded doctors more for doing procedures than for spending time talking with patients also contributes to the problem.

“The complexity of the health system is driving the need for more information,” said Laura Weil, interim director of the health advocacy graduate program at Sarah Lawrence College. “But with our payment system, doctors have less time to help patients sort through the issues. Patients are looking for other players.”