

WITH CARE AND PRAYER: One Survivor's Remarkable Journey



Norma Wilson with Luis E. Raez, M.D., F.A.C.P., co-leader, Lung Cancer Site Disease Group, and director, Hematology-Oncology Clinics and Chemotherapy Treatment Unit, UM/Sylvester (center) and Richard J. Thurer, M.D., co-leader, Lung Cancer Site Disease Group, and director, thoracic surgery, University of Miami Leonard M. Miller School of Medicine (right).

At first, Norma Wilson, a dedicated mother and retired businesswoman, believed her dry, persistent cough was nothing to worry about. She thought that perhaps it was a lingering cold or an innocuous allergy. Then began the dull, yet constant pain that radiated from her chest to her back. “At that point I thought I might have pneumonia or a muscular problem,” she recalls.

When neither the cough nor the pain subsided, Wilson, a former smoker who had not touched a cigarette in more than 30 years—knew she had to seek medical attention. She quickly suggested to her internist (a Miami-based physician in private practice) that he schedule a CT scan to pinpoint the problem. When the results of the CT scan came back a few days later, both Wilson and her husband, Allan, were not ready for the diagnosis they were about to hear. The CT scan, and later a needle biopsy, both confirmed she had advanced Stage II lung cancer and that the disease involved the lung and the ribs. Both Wilson and her husband were dumbfounded.

“It was difficult to believe, when you’ve been healthy and active all of your life, that you now have to deal with a life-threatening illness. It came as a complete shock. You don’t even function the first couple of days. I was essentially just going through the motions,” she recalls. (Even after many years of not smoking, former smokers carry a high risk of developing lung cancer.)

Her prognosis was not good. Doctors informed Wilson and her husband that most patients with lung cancer have about a 20 percent chance of survival. According to the Centers for Disease Control and Prevention, more people die from lung cancer than any other type of cancer—a statistic that holds true for both males and females. Roughly 174,000 Americans are diagnosed with lung cancer every year. In fact, since 1987, lung cancer has been the leading cause of cancer death in women, surpassing even breast and ovarian cancer combined.

With her mind still reeling from the news of her diagnosis, Wilson knew she had to find an oncologist to begin her treatment as soon as possible. As an active community leader and volunteer, and a former University of Miami Board of Trustees member (she was one of the first female board members to join the University in 1971), Wilson knew the targeted “site-based” approach to treating cancer at the University of Miami Sylvester Comprehensive Cancer Center made perfect sense. It was the only approach she opted for.

“If you live in this community, you know that UM/Sylvester has a very good reputation and that its dedicated doctors are experts in treating specific types of cancer,” she explains. “And I knew that’s what I wanted—I wanted to go with someone who solely specialized in lung cancer to treat me.”

She found her answer in Luis E. Raez, M.D., F.A.C.P., director, Hematology-Oncology Clinics and Chemotherapy Treatment Unit, UM/Sylvester, and co-leader, Lung Cancer Site Disease Group. Her meeting with Raez was pivotal in a number of ways, especially emotionally.

“When I met with Dr. Raez and we began discussing my treatment, I slowly began to come to grips with my diagnosis,” she admits. “When something like this occurs, you begin to ask yourself, ‘how did this happen?’ You just don’t understand it. But then I realized that there is nothing to do but to move forward, to keep a good frame of mind, and to get on with the prescribed protocol.”

Raez and Richard J. Thurer, M.D., co-leader, Lung Cancer Site Disease Group, UM/Sylvester, and director, thoracic surgery, University of Miami Leonard M. Miller School of Medicine, recommended Wilson undergo a combined treatment approach. This consisted of doctors first administering chemotherapy (carboplatin and paclitaxel, drugs that arrest the growth and induce the death of cancer cells, which are then eventually destroyed) along with radiation therapy to shrink the tumor.

“She handled the chemotherapy very well,” says Raez. “She had no complications, but she also has a very positive attitude. She never complained and was easy to treat, and I think that helped a lot. In fact, I think her attitude is what has helped her stay alive and hopefully cancer free forever.”

To make the best of these treatment sessions, the Wilsons would pack a picnic lunch to take with them to UM/Sylvester. After finishing their meal, Wilson would undergo her two-hour chemotherapy session with her husband at her side, who often brought work with him to complete while he waited. The treatments often left her tired and fatigued. After six weeks of treatment (which included chemotherapy and radiation) she had a two-week respite, allowing her to regain her strength in preparation for surgery.

Since the tumor had spread to a portion of her chest wall, some ex-



perts might have suggested that the cancer was too far advanced for curative surgery (removal of the entire tumor), explains Thurer. In Wilson's case, doctors performed an initial procedure involving a small incision to accurately stage (determine the extent of) the tumor to make sure the cancer had not spread to the lymph nodes—which it had not. Once the chemotherapy/radiation portion of the treatment was completed, she underwent an extensive three-and-one-half-hour surgery to remove the tumor and parts of her ribs where the cancer had spread. She remained in the hospital an additional two weeks to recover. Her husband Allan, her daughter Deahni (who traveled from

much of it has to do with the excellent care she received at UM/Sylvester. A very spiritual person, she also is convinced prayer was immensely helpful during her road to recovery.

"P rayer brought me a great deal of comfort," she says. "I never prayed to God to make me better. I prayed for God to give me courage, faith, and the strength to carry on with a good spirit and good frame of mind. He answered my prayers. With the help of my husband, support of my family, my belief in God, and the people who were taking care of me—I really got through it very well."

As a result of this incredible jour-

and close friends and family members who were extremely supportive through it all. "I had such a great support system... I just couldn't let them all down. It was my obligation not to die," she says.

Today, Wilson continues to be an active member of the community and works closely with a number of organizations including UM/Sylvester, Jackson Memorial Hospital, the Greater Miami Jewish Federation, the Foundation of the Greater Miami Jewish Federation, and Temple Judea. She sees Racz every three months for CT scans to make sure there is no cancer recurrence, which is frequent in lung can-

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New Mexico to be with her mother), and two of her sons, Daniel and Douglas, stayed by her bedside.

According to Thurer, the combined approach—where preoperative chemotherapy and radiation were administered first, followed by surgery to successfully remove the tumor—is the primary reason Wilson has fared so well.

"I think this is a good illustration about the benefits of a combined treatment approach as opposed to just performing surgery, but doing it in a coordinated fashion up front," he says.

Wilson has been cancer free for more than three years and believes

ney, Wilson has become what she dubs a "cancer coach." She schedules meetings with cancer patients who call her to ask for help and advice. She offers them advice, but more importantly, lends a compassionate ear.

"I almost feel that this is my destiny, because through this, I have met a lot of people who have since become my friends. They call me and I listen to them and to their fears. I try to give them a lot of support, the kind of support I needed and received. I feel I just have to give something back."

Wilson also is immensely grateful to her husband, four children,

cer patients. Although she admits she still gets "edgy" before her CT scans, she never misses a follow-up visit. People still call her when deciding where to seek treatment. She always is patient and listens to them before responding. Her answer, though, is always the same.

"When they are first diagnosed with cancer, many people often run to Sloan Kettering or other cancer centers for a second opinion. When they ask me, I tell them go ahead and get another opinion," she explains. "But then I tell them to come back home. 'Be sure to see what we have here at UM/Sylvester,' I say, 'because what we have here is so good.'"