

# Through the Fog

By Katie Brennan

You turn on your brights to combat a night's fog, take extra precautions and perhaps reduce your driving speed. But what happens when that fog is in your mind? How does one even begin to maneuver through an ongoing, grating cloud living in the brain? Acknowledging its existence is a feat in itself, due to a lack of understanding and discussion within the medical community. With a little help from my growing frustration and firsthand cancer experience however, I will attempt to take on the phenomenon and uncover the reality surrounding chemo brain.

“Chemo brain or brain fog are the common terms used by cancer survivors to describe thinking and memory problems that can occur after cancer treatment,” according to **Mayoclinic.com**. The reality of chemo brain is not nearly as easy to summarize. In particular, my reality of brain fog is of a constant internal battle, due to the changes in a once nimble mind. "People with chemo brain often can't focus, remember things or multitask the way they did before chemotherapy," explains **Dr. Daniel Silverman, head of neuronuclear imaging and associate professor of molecular and medical pharmacology at the David Geffen School of Medicine at UCLA**. For me, chemo brain literally feels like a settling fog appearing in areas of my brain where formerly I was used to quick responses.

Upon beginning my research, I uncovered a common theme: that this phenomenon has many causes, and therefore even fewer solutions. In almost all the findings, physicians note that although a very real problem, chemo brain is difficult to track and even analyze. It is agreed the main causes of chemo brain are cancer treatments such as chemotherapy, but there are as many risk factors as there are different types of patients. Some of the possible contributors are: age, depression, medications, low blood counts, and of course the emotional upheaval of dealing with cancer itself. This no doubt leaves a very wide net to cast around a very complex side effect. It is estimated that at least 25 percent of chemotherapy patients are affected by chemo brain, according to **ScienceDaily.com – 10/8/06**. As **Tim Ahles, PhD** explains, because there are an increasing number of long-term cancer survivors, we are beginning to notice the more subtle, yet long-term side effects from chemotherapy and cancer diagnosis like chemo brain. Due to the medical advances and treatment of cancer today, it seems that chemo brain has just recently been acknowledged, and is therefore still uncharted territory within the medical world. Fortunately, most references along with many survivors agree that chemo-brain eventually subsides with time. As **Christina Meyers, Ph.D., A.B.P.P** so plainly notes, however: “Some people never have it, some people get over it, some people never get over it.”

It is constructive for me to take a step back and acknowledge the presence and characteristics of my own chemo brain. As a Stage 3 Melanoma cancer survivor who underwent nearly a year of chemotherapy (Alpha Interferon) in 2006 and concluded in July of 2007, my brain fog still exists today in many ways. The most outwardly apparent flaws deal with word confusion, cognitive thinking and concentration. I notice words lay resting on the tip of my tongue, never to actually be processed. I often confuse words that sound similar or start with the same letter. I frequently cannot recall the actual word I want to use, and if I do, it is usually after the fact. I've always been known for my quick wit, and now find I have a harder time thinking up a fast and clever response. My memory seems to have dimmed. It takes me longer to process a thought. At times, I feel like someone has thrown a heavy blanket over part of my brain, or that a large portion has a lingering and nasty hangover. The other common side effects I experience are confusion, difficulty concentrating and a shaky short-term memory. I find myself asking others to re-explain a process or to repeat the details of a story that were already told. I also have trouble learning advanced or new processes as quickly as I had pre-chemotherapy. Although I have had no brain trauma, at times I experience the kind of confusion and concentration problems you might expect in such a patient.

Many other cancer survivors have expressed that of all the side effects of chemotherapy, the brain fog took the longest to subside. The typical time frame I've gathered until a full 'chemo brain recovery' has been from at least 6 months to over 4 years. I've also experienced that chemo brain was more of an accepted side effect within the cancer world while a patient was actually on chemotherapy. Many of the other common side effects such as fatigue, depression, non-appetite and insomnia experienced during treatment would magnify the feeling of a foggy brain. Because of the presence of other symptoms impeding on cognitive thought, it was much more accepted during treatment vs. after treatment. I myself can clearly recall my oncologist acknowledging brain fog once, explaining that it should diminish within months after treatment. The communication I had during my treatment with other patients, however, assured me that brain fog was a very real and potentially more longer-lasting side effect.

This absence of medical awareness is a large reason why chemo-brain is so misunderstood. Unfortunately, lack of specific research on the topic combined with physicians' focus on other aspects and side affects of chemotherapy may continue to keep the phenomenon of chemo brain from mainstream discussion. **George Sledge, M.D.** addresses this issue within the medical world: "This is an area where medical oncologists have difficulty, partly because the sophisticated neuropsychology testing is not available to the medical oncologist in the clinic. The reality is that for many medical oncologists, because their training is in cancer treatment instead of the brain, they have trouble dealing with this. Cancer physicians are good at taking care of acute toxicities of therapy but not nearly as good at taking care of chronic toxicity. And finally, unfortunately but realistically, having these discussions actually takes a fair amount of time in the clinic, and medical oncologists are frequently running in and out of rooms quickly to get through the day. That's not an excuse, but it's a reality."

The overall opinion of brain fog, both within the general population and even for cancer survivors is that because chemo brain is not fatal it is not made an issue. This common opinion on chemo brain is also expressed by **Christina Meyers, Ph.D., A.B.P.P (10/18/08 - breastcancer.org)**, who writes: “The main thing to keep in mind is that it's generally very handle-able, and the alternative is not good. Inevitably, this means that patients and survivors must be their own advocates.”

I've found that it can be a very slippery slope for myself and other patients to even admitting to having brain fog. Cancer survivors usually develop a strong will, eventually accepting their diagnosis (thus any attached side effects), and do not want to use a crutch to explain their situation. We learn to adapt to a 'new-normal,' dealing with shortcomings, and are simply grateful that we have the opportunity to have these shortcomings at all. For those not close to the cancer world, typical 'accepted' shortcomings could range from surgical scars to numbness to any number of physical disabilities. I have learned to accept and even like my numerous scars, and can deal with the lymphodema (numbness), but I am finding it much harder to accept and discuss my lingering brain fog. I notice that I will often take extra steps to cover-up the fog to the outside world. **Christina Meyers, Ph.D., A.B.P.P (10/18/08 - breastcancer.org)** commonly sees this, and explains that cancer survivors “can retain their functionality, but there's a cost and effort.” **Dr. George Sledge (10/18/08- breastcancer.org)** shared a patient's story to explain this extra internal cognitive step:

*I had a patient several years ago who was a flight attendant, and part of her job as a flight attendant was to go up and down the rows in the plane taking drink orders. She said prior to receiving her chemotherapy, she could take six, eight, or 10 drink orders with perfect memory. After the chemotherapy, she would write down the orders for the drinks because she couldn't remember them any more. To all the world, she appeared to have the same functionality as before, because she had made an adjustment for the chemo brain that kept her looking functional. But she could tell the difference.*

The haunting part of this story is not that she altered her behavior to accommodate the fog, but that 'she could tell the difference.' For me, the mental and even social effects of brain fog have been very severe. I find myself constantly afraid that people will classify me as incompetent or slow if I don't immediately internalize the fog and find a way to 'correct it.' I have unfortunately formed the habit of being overly defensive to compensate for the fog. I take mistakes twice as hard now, and assume a simple error has permanently exposed my newly cognitive difficulties to the world. This internal battle is exhausting and seems to perpetuate. I must take numerous extra steps and adjustments within my daily routine to successfully maneuver through my brain. I hope the true reality is indeed that there is little attention paid to my brain fog – and that I am the one drawing the attention to it with my defensive and often paranoid responses.

I suppose this essay in itself is finally my attempt at advocacy, yet also a personal opportunity to better cope with my brain fog. I realize I had already been doing many of the steps suggested by **Mayoclinic.com** listed here;

- Repetitive exercises to train the brain (i.e., day planners, reminders, daily routines)
- Tracking and understanding what influences memory problems
- Learning coping strategies
- Stress-relief techniques
- Practice better health techniques (eating right, adequate sleep, exercises, etc)
- Discussing the problem with others
- Acceptance

I now realize I've unconsciously adapted some positive coping mechanisms for dealing with my chemo-brain. I make lists, schedule reminders on my cell phone and work email, and I've even occasionally resorted to using my Grandpa Al's ancient art of post-it notes. (Unlike my grandpa, I have not taken this to the extreme of post-it notes reminding me of other post-it notes!) I am also trying to incorporate relaxation techniques and frequent exercise to relieve stress. Of all the suggested treatment tips, I now realize that the few I had lacked; acceptance, and telling others, is invaluable for a healthy mental recovery. I must say that from simply addressing my issue of brain fog and finding its existence in the cancer world, I have come to my own genuine treatment plan. The most productive and real solution I can find is to make my 'general public' of friends and family more aware of this struggle, and to be more accepting of the fog itself.

It is possible there may never be a truly open medical dialogue about chemo-brain, and yet it is almost certain that this issue will continue to affect cancer patients and survivors. The positive perspective is that we are lucky enough to be here experiencing this, and will hopefully be lucky enough to see the problem further dissolve in the future. I've learned that instead of creating a debilitating mental struggle by internalizing my brain fog, I can find relief in recognizing and dealing with its existence. Instead of fighting its presence, I must learn to work with it and hope that one day, the fog will clear.

*Katie Brennan is a 27-year-old resident of Columbus, Ohio and Stage 3 melanoma survivor. She is the founder of The Black Ribbon Benefit, a non-profit effort that has raised significant funding for the Melanoma Research Foundation since 2006.*