

## Healing From the Inside Out One Person's Path With Cutaneous T-Cell Lymphoma—Mycosis Fungoides

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My skin has always been my weakest organ—hives, rashes, welts, acne, and itchy skin in reaction to foods, animal dander, chemicals, bug bites, and toxic fumes. So when I noticed patches of dry, rough, red skin on my lower torso in my early 50s, I accepted them as yet another sign of being oily above the neck and dry below. As the patches grew in size and number, I slathered on myriad flavors of lotions. Since no physician remarked about them during exams, I assumed there was no need to be concerned. In late 1999, I saw a dermatologist for a wart and asked about the patches. She offhandedly said she could biopsy them. Unable to get more out of her, I decided it couldn't be worth pursuing when she seemed so cavalier.

A year later, I visited another dermatologist about the same recurring wart (now gone). When I showed her my patches, she was straight with me, verbalizing her suspicion of cutaneous T-cell lymphoma (CTCL)—mycosis fungoides (MF). She sensitively answered my questions, printed an article off the Web for me, and performed 2 biopsies. Her honesty, knowledge, and compassion told me I'd be in good hands.

By the time I returned to hear the confirmed diagnosis, I had spent days on the Web learning everything I could about MF, the DNA chain, and the lymph system. I learned how a disease as rare and unknown to most doctors as CTCL could lead to a typical delay of 6 to 8 years before proper diagnosis, often contributing to incorrect treatments. Subscribing to the Association of Cancer Online Resources CTCL-MF listserv became a daily reminder that I had cancer. Postings from patients with CTCL provided a reality check as I read about their symptoms and treatments, particularly since many who contribute are more severely involved. I was 61 years old with non-Hodgkin lymphoma, knowing that my father died from Hodgkin lymphoma at 63 in 1971. I had occasionally wondered if I would succumb to his path. Yet, deep down, I know I approach life differently and will not!

My dermatologist was surprised when I took the diagnosis so calmly. My years of study and practice in spiritual healing and mind-body connection work prepared me for accepting what is and facing reality. I already knew what is important: love, live, and appreciate every moment; don't sweat the small stuff; laugh, dance, and experience life's joys; spend time with my amazing grandchildren and children; eat and live healthy; be glad that my diagnosis wasn't confirmed earlier, allowing fewer years to worry about cancer; be grateful for a doctor who listens and welcomes me as a partner in the process.

I know I don't want my patches to get worse. I also don't want to use drugs, which I've always tried to avoid. While many on the CTCL-MF listserv relate success stories of prolonged "remission" following various treatments, my heart cries for those who tell of exhaustion and harmful side effects from medications; requiring secondary drugs for symptoms resulting from a primary drug; burned skin caused by poorly considered and administered psoralen-UV-A (PUVA) treatments; painful, thinning skin due to extended use of topical cortisone; side effects from total skin electron beam therapy; and aggressive treatments, even for early-stage disease, only to have symptoms eventually reappear. A treatment that works for one patient may not work for another, adding to the confusion. What bothers me most is that the focus is on relieving symptoms without getting to the cause—a compromised lymph system.

All of this raised questions in considering my own treatment. If eliminating MF patches is mostly palliative, and a small percentage of stage I patients progress to a higher stage, why not take a risk and use the least invasive approach possible? If cancer continues to lurk in some dark corner of the lymph system, what does remission mean anyway? Why introduce pharmaceutical drugs that suppress and compromise

healthy parts of the system? In addition to focusing on the manifestation of the disease, why not try to get to the source to heal from the inside out?

Together with my dermatologist, I chose my path. I returned to tai chi, chi gong, yoga, reiki, and meditation practices, all of which stimulate the lymph system and shake up toxins. I began seeing a Chinese doctor who uses acupuncture and Chinese herbs to balance and cleanse toxins from the body. Among the resulting shifts I've experienced under his care is a better functioning thyroid, allowing for a lower dose of the Synthroid (levothyroxine sodium) I've been taking for 30 years. My dermatologist prescribed cortisone cream. After a few weeks, my aversion to its use won out and I quit. Next she suggested PUVA. "How do I do that without taking psoralen?" I asked. She smiled and asked, "Do you have a place where you can tan in the nude?" I could have kissed her! I appreciate most that she isn't threatened by my suggestions and complementary resources. When I tell her of an herb dispensed by my Chinese doctor, she simply writes it down, without judgment.

On the first warm day in late April, I lay on a blanket in my private backyard. It was sheer heaven to feel the sun's penetrating warmth after years of deprivation. I marveled that the sun causes one kind of cancer and helps heal another. I couldn't worry about developing a cancer that I don't have when I must treat the one that exists.

Soon after my first sun treatment, my face broke out in inflamed "pimples" over a course of 5 days. The center of each sloughed off and lymph fluid oozed out. They itched like mad while scabs formed. I applied  $\alpha$ -hydroxy lotion and used the tai chi practice of going into pain to minimize the itching. I was put in touch with my teenage self who bravely walked out of the house every day with a face full of lesions. Within 10 days, my skin was smooth with nary a trace of these invaders. The dermatologist diagnosed contact dermatitis, but I knew differently. My 2 months of tai chi, chi gong, and reiki healing had stirred up toxins, and the sun baked them out. They found their way through old, familiar acne pores where they already knew how to exit.

All summer, I maintained my dermatologist's suggested tanning schedule of 15 minutes per side, 3 times a week. I engaged in guided visualizations, "seeing" my DNA repair itself, encouraging apoptosis and the cloning of healthy cells, and feeling toxic cells being released. I told them to dance on the wind, play with the stars, fly to the sun, but not to take up residence in anyone else because their work was done. Depending on how tightly I squeezed my closed eyelids, I saw yellow, orange, red, and fuchsia, which became my healing colors. I created a large abstract drawing of my lymph system with a huge, drippy brush that scattered nodes, then added my healing colors (Figure). It is now an energy source above my bed, and I chant beneath it morning and night.

While exposure to the sun faded my patches, it also produced a puzzle. As the rest of my body browned, my lower torso remained white, as if I were wearing underpants. Invisible MF seemed to extend beyond the patches, causing hypopigmented skin. In July, evenly spaced, small brown spots appeared, slowly enlarging over time. By September, the area was 30% tanned, and I looked like a spotted leopard. My dermatologist hypothesized that, as each cell began to heal, tanning started at the hair follicle and spread outward. She encouraged visiting a tanning salon through winter until I achieve an even tan, using a booth that most closely replicates the sun's balance of UV-A to UV-B. I was delighted that the desired booth is one in which I can stand up. I dance and chant through the treatments. My new visualization includes connecting the dots. Now 85% tan, there is no evidence of red patches. As a protective measure to inhibit accelerated skin aging, I cover everything but the lower torso for three fourths of my treatment time (quite a sight with a pillow case clamped over my head). Once evenly tanned, I will reduce the treatments and go on maintenance.

I know that my path is not necessarily one that all would choose, whether doctor or patient. It has given me a whole new understanding of the term "managed care," namely, that I must manage my own care. My dermatologist and I are encouraged by the success of my path of least resistance. Not only am I spared the compromising aspects of drugs, but I feel terrific. I sense occasional shifts within my body as I heal from

within. I have energy for my grandchildren, contra dancing, exercise, work, and play. I feel like a healthy person who happens to have cancer.

This is not to diminish the fact that some patients present significant symptoms that require aggressive intervention, and I realize how fortunate I am to be able to choose this path at this time. But why, I wonder, when symptoms are at beginning stages and there is room for less-invasive approaches, do doctors immediately reach for handy drugs and the "big guns"? When will the medical community begin to listen to the likes of Bernie Siegel, Andrew Weil, Candace Pert, Christiane Northrup, Joan Borysenko, and others, about the benefits of stimulating health and well-being, seeking the least-invasive treatment, and healing from within?

There is a reason that increasing numbers are turning to more holistic practices as we seek healing. I look forward to the day when the best of Western and Eastern approaches converge rather than having one considered an alternative to the other.

## **ARTICLE INFORMATION**

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