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PALM BEACH



Bethesda Women's Health Center BAPTIST HEALTH SOUTH FLORIDA A



BREAST CANCER SURVIVOR DIANE GILMAN

THE SIDE EFFECT SHE DIDN'T EXPECT

How a TV shopping star deals with lymphedema HSN's 'QUEEN OF JEANS' DIANE GILMAN

She's cured... but 'frustrated' by a new, lifelong condition

Diane Gilman, shown here in her Fifth Avenue penthouse, looks back at 2018 — her year of battling cancer in both her breasts — this way: 'I took a year off from my life to save my life.' PHOTO BY MANOEL RENHA

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'I believed, naively, that when my cancer treatment was complete, I would be done with it, too.'

— Diane Gilman

By Jan Tuckwood

Diane Gilman is HSN's 'Queen of Jeans.

You could also call her the "Queen of Camouflage."

Got a less-than-perfect Baby Boomer body? Need some lift in your caboose? Or a waistband that controls muffin top?

Gilman's DG2 jeans are so stretchy and forgiving, they cover a multitude of middle–age spreads.

She calls this "negotiating with Mother Nature."

Why not look sexy, no matter your age or body shape?

She's 74, looks 20 years younger and pitches her jeans with zeal and conviction.

That's why the designer has sold nearly 15 million pairs of DG2 jeans in 11 years on the home shopping channel. Sometimes, she sells 100,000 pairs in one day.

Diane's got her rear covered, literally, when it comes to solutions–driven denim.

Now, necessity has fueled a new quest for creative camouflage. Her left arm is swollen by lymphedema, caused by the removal of the lymph nodes under her left arm during successful breast–cancer surgery in 2018.

Up to 40 percent of breast cancer patients who have had lymph nodes removed get lymphedema, an incurable condition that causes limbs to swell because the body can't properly drain lymph fluid.

"I believed, naively, that when my cancer treatment was complete, I would be done with it, too," Gilman says. "I never believed I would be part of the 40 percent of women who get this lifelong condition. Lymphedema was the sprinkles on the cherry on the icing of the cupcake of my year–long treatment...but here I am, in good company."

In August, Gilman joined the honorary board of the Lymphatic Education & Research Network, and she's serving as an "ambassador" for lymphedema education.

Actors Kathy Bates, Patricia Clarkson and Judi Dench also serve on the



September 2017: Diane Gilman with writer Jan Tuckwood at HSN headquarters. Three months later, Gilman was diagnosed with cancer in both breasts. After chemo, a double mastectomy, radiation and reconstruction, she feels 'more energized and inspired than ever' and considers her cancer battle a gift, because 'it cracked me open and allowed me to feel love and give love.'

board. So does talk show host Wendy Williams, who recently announced she has lymphedema in her legs.

Williams told her audience she uses a machine to stimulate circulation of lymph fluid. Other treatments include wrapping the arm or leg to help reduce swelling and massage.

Diane says she's still looking for the key to improving the swelling in her arm. She's reduced salt and tried changing her diet.

"Still looking' is the operative phrase," says the designer, who got her start in the 1960s, designing jeans for rock stars Janis Joplin, Jimi Hendrix and the Jefferson Airplane. "I'm now getting a full understanding of what it means to have a chronic condition."

Lymphedema affects 10 million Americans, not just breast cancer survivors, but it is not discussed much.

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December 2018: Dr. Eva Andersson Dubin and Diane Gilman at the Dubin Breast Center annual gala in New York City.

"I was given a list of physical therapists and then told, 'you're on your own,'" Diane says. For women whose bodies have gone through the gauntlet of chemo, surgery and radiation, a swollen arm may seem like no big deal.

But it's a constant reminder, it's uncomfortable, and it requires wardrobe work–arounds.

Looking good is Diane Gilman's business.

Now, she looks for and designs tops and blazers with stretch, to accommodate her left arm.

When she was honored at the Dubin Breast Center gala last December in New York, she wore a silver knit minidress with long, bell sleeves.

"I won my battle against cancer, but I wasn't prepared for the fight to come – the one with lymphedema," Diane said in the statement announcing her appointment to the Lymphatic Network board. "Cancer patients are not given the information they need, and getting treatment for lymphedema, even if you live close to the best medical centers in the world as I do, is challenging. I received so much love and support during my year–long cancer treatment, and I am ready to make a difference for those facing the difficult diagnosis of lymphedema."

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Diane Gilman — age 74 and cancer free — got her first mammogram at age 70.

'Love your life'

It's October. Get your mammograms, ladies

In September, Diane Gilman got her own hourlong show on HSN, the TV shopping channel.

Women who love her DG2 jeans can see her and her friend and show host Bobbi Ray Carter every Thursday at 10.

That's a lot of women: 800,000-plus customers with Gilman's initials stitched on the waistbands of their pants.

If it weren't enough to boost aging cabooses with her super-stretchy skinny jeans, bell-bottoms and bootcuts, TV's "Queen of Jeans" has something beyond spandex to celebrate.

SHE'S FREE OF CANCER

She's 74 and free – and that's saying a lot, because her cancer was advanced when it was discovered in December 2017. She was so busy building her business, she had neglected getting her own checkups.

She got her first mammogram at 70.

So, ladies, get yourselves checked. It's October, breast cancer awareness month. Gilman's convinced that her cancer battle has strengthened her purpose in life.

"What is brighter?" Gilman asks. "A million teeny half-lit particles of light? Or a direct ray of light? Don't diffuse your light, that's what I want women to know.

"Love your age. Love your life. Love your light."

It's Gilman's honesty that radiates with her customers, says Carter, the HSN show host who was first to share a set with Gilman 26 years ago. Gilman's been selling DG2 jeans for the past 11 years.

"Diane creates an environment on national television where women can express their emotions. That is a huge compliment to her," Carter says. "What she offers is so much more than a pair of jeans."

She offers an uplifting message: "The last chapter of our lives is when all the drama comes to a purpose. Thank God, I've got a chance to have a great finale."

- Jan Tuckwood

Surviving – and thriving – after breast cancer

We all know that breast cancer statistics - the ones that say 1 in 8 women will be diagnosed with the disease during their lifetime – can be scary.

But what's heartening is how much progress has been made in defeating the disease – especially in the past decade.

That's certainly the belief of Bethesda Health breast surgeon Dr. L Raul Arroyo, who says that he always reassures his patients after diagnosis that "90 percent of the time, women will have their breast cancer successfully resolved and never suffer a recurrence."

And how has this become the case? Arroyo cites a few factors:

First, a multidisciplinary "university" approach to breast cancer surgery and aftercare is the biggest difference in breast cancer treatment.

For patients undergoing breast cancer surgery at



Bethesda Health, Arroyo is just one member of a coordinated team that devises a comprehensive treatment strategy. This has become the industry standard nationwide.

Other advancements that have greatly enhanced odds of surviving, says Arroyo, include:

Dr. L Raul Arroyo

Treatment is now totally individualized. "Now two treatment protocols are alike.'

Genetic testing for the BRCA1 and BRCA2 gene mutations. "For high-risk patients, this gives them more information so they can make more informed decisions."

Genetic pathology and targeted chemotherapy. "Knowing the genetic makeup of a cancerous tumor gives oncologists better predictive scores on both how the cancer will respond to different forms of chemotherapy and the likelihood of recurrence."

TREATING SECONDARY CONDITIONS

Oncology physicians are now far more mindful than in years past of the ancillary effects of surviving breast



up to 40% of women who undergo breast cancer treatment can develop lymphedema –which can happen soon after treatment begins or years later.

Patients are urged to be proactive in treating this condition. "Doing so can help slow the progression," says radiologist Dr. Carol Adami, medical director of Bethesda Women's Health Center. While there is no

Dr. Carol Adami

cure for lymphedema, there are ways to manage the condition.

The most common is complete decongestive therapy a non-invasive protocol that combines exercises, compression garments and manual lymph massage. For more severe cases, there is a more invasive technique called a vascularized lymph node transfer.

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From the Lymphatic Education & Research Network

WHAT IS LYMPHEDEMA?

Lymphedema is a chronic lymphatic disease that results in swelling in one or more parts of the body. It can be hereditary (primary lymphedema) or it can occur after a surgical procedure, infection, radiation or other physical trauma (secondary lymphedema). In breast cancer, for example, it can appear in the arm on the same side as the cancer, after lymph nodes are removed from the armpit region for cancer staging. Primary lymphedema often occurs in the lower extremities. Lymph is the protein—rich body that accumulates when the lymphatic system for

WHY IS THE LYMPHATIC SYSTEM IMPORTANT?

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The lymphatic system is part of the immune system. I of "immune tra" the process whereby inf ting cells can be mobilized to the tissues that require healing. When the lymphatic system is compromised by surgery, trauma or improper development, the a ected part of the body is prone to recurrent infection because of the faulty surveillance mechanism.

WHAT IS A BREAST CANCER SURVIVOR'S RISK OF GETTING LYMPHEDEMA?

Estimates vary and, fortunately, the risk has been progressively declining. Decades ago, breast cancer surgery carried a 50 percent risk of lymphedema development. Today, patients who have axillary lymph node dissection have a lifetime risk of 15—25 percent. If surgery is limited to sentinel node techniques, without radiation, the risk is about 6 percent.

HOW DOES SURGERY AFFECT THE RISK OF LYMPHEDEMA?

The risk is chie y aligned with lymph node removal. With just a lumpectomy, it's not a factor. The sentinel node technique is the removal of no more



Talk show host, Wendy Williams, recently announced she has lymphedema in her legs. Williams told her audience she uses a machine to stimulate circulation of lymph fluid.

than four lymph nodes, where the risk is about 6 percent. If you have more than four lymph nodes removed, the risk rises to 15 to 25 percent.

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DOES RADIATION INCREASE THE RISK OF LYMPHEDEMA?

Yes, radiation can traumatize the lymphatic system like surgery.

IF I HAVE HAD LYMPH NODES REMOVED UNDER ONE ARM, DO I HAVE TO WORRY ABOUT THE LYMPH NODES IN OTHER AREAS OF MY BODY?

No. The lymphatic system is present throughout the body, but lymphedema is a regional disease that a ects only the part of the body that is subjected to surgery or radiation.

For more information, go to www.LymphaticNetwork.org





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Actors Kathy Bates, Patricia Clarkson, Judi Dench and Andy Cohen also serve on the board of the Lymphatic Education & Research Network

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