



From Diagnosis to Doctorate

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I graduated Hardin-Simmons University with a BS degree in Exercise Science in May of 2019. The following August I was set to start Physical Therapy School, also at HSU. This was something that I had been working towards since sophomore year of high school and I could not be more excited. As I prepared to start graduate school, I was also spending a lot of time in doctors' offices and even saw a couple of physical therapists. After eight months of low back and hip pain I received a diagnosis that halted my goals in a heartbeat.

I started having low back pain in the winter of 2018 that had progressed to my left hip. By May of 2019 I was in a great deal of pain that kept me up at night, as it was difficult to find a comfortable position. I was experiencing a deep aching that spread over the left side of my low back around to the front of my hip. Walking wasn't too much of a problem for me but going up stairs and sitting for long periods of time aggravated the pain. Certain exercises, such as hip flexor stretches, would make it better, but only for a short time. I remember being so frustrated because I could not seem to get away from the pain. It reached a point that Advil was my only respite. I received several different diagnoses, all from different healthcare professionals including my PCP, a chiropractor, and a physical therapist. I heard everything from bursitis to psoas tendonitis, but no matter how diligent I was at completing my home exercise program, the pain kept returning. I also began having a similar pain in my shoulder, but there was a very sore spot directly over my left shoulder blade and the two areas of pain were never connected. In July I went to see an orthopedic doctor who ordered an MRI. After reviewing my scan, he still didn't have an answer for me, but sent me upstairs to start physical therapy again. He also referred me to a hematologist because there were abnormalities in my bone marrow that he recommended we check out. I thought that was odd, but to be frank, I didn't think twice about it until I was sitting in the waiting room of a Texas Oncology with spiking anxiety. One CT scan, two bone marrow biopsies, and a second opinion later, I finally knew the root of my pain. In July of 2019, one month before I was supposed to start PT school, I was diagnosed with Diffuse Large B-Cell Lymphoma.

I was told I had Stage 4 Non-Hodgkin Lymphoma that had set up shop in my bone marrow. The staging was so because of the location, not necessarily the severity. According to my first oncologist, lymphoma is staged based on where the cancer is located. If it is in one group of lymph nodes it is considered stage I. When two groups of lymph nodes that are on the same side of the diaphragm are involved, it is considered Stage II. Stage III is lymph node

involvement on both sides of the diaphragm and when the cancer moves outside the lymphatic system it is considered Stage IV. My cancer had a rare presentation as it started and stayed in my bone marrow, I never had lymphatic involvement. After a long conversation with the director of the HSU Physical Therapy department, I was officially deferring starting school for a year to fight cancer. Shortly after my diagnosis, I started my chemo cocktail of 5 different drugs, one of which has been so lovingly coined “Red Devil”, for its bright red color. I received 6 rounds of chemo through my port, once a week, every 3 weeks, and a total of 4 lumbar punctures to inject chemo into my spinal canal. My major side effects included hair loss, loss of appetite, and fatigue. I had other side effects, as is expected, but they were manageable. After my second to last treatment, I started to develop a numbness in the tips of my fingers. The peripheral neuropathy luckily was not lasting and dissipated a few weeks after I had finished treatment.

There is a certain connection found among cancer patients simply due to the unique obstacles and experiences that come with this particular battle. Empathy is a powerful tool, but there is a special bond that comes with knowing that someone else has also stood in front of the bathroom mirror and watched as chunks of hair came out in their fingers. One moment that I have always remembered happened one afternoon as I stood in the tea aisle of the grocery store. I had my head wrapped in a scarf and was trying to decide on an herbal tea. A woman stopped and asked if I needed help picking a tea. I told her I was just very indecisive, but we struck up a conversation. I found out that her mother fought her own battle against breast cancer and she recommended some tea to me that her mother had liked to drink during treatment. She was kind, helpful, and we made a small connection in the grocery store that day. When you find out that someone has had a personal experience with cancer, all of a sudden there is an ease to the conversation because you know that this person has walked a similar path as yours. One thing I am amazed by in my interactions with other cancer patients and their families is the resiliency and bravery of the human spirit. There are good days and there are bad days, days when you may feel a burst of energy after hearing good news from your doctor and days when the nausea and anxiety keep you glued to the couch. Yet, I continued to see the same faces sitting around me waiting for our rounds of chemo for the week, still fighting.

It wasn't until I was sitting in an infusion chair that I first learned that oncology physical therapy was a possibility. It was a specialty that I hadn't ever heard of before that point and I wanted to know more. Now that I am happily in remission and in the middle of my education, I know that I want to use the skills I am currently acquiring to help cancer patients who all hold a close place in my heart. I attribute the blessing of manageable side effects to numerous things, one of which was going for walks around our neighborhood after each infusion. I could get my blood pumping and it would give me a boost in energy as well as increase my appetite. It was a good way to start what would eventually turn into a difficult couple of weeks as the chemo spread through my body. Physical therapists get people moving and if anything, it can at least give patients some control. Those fighting cancer can often feel helpless, they feel as though their body is no longer their own and are at the mercy of their doctor's advice. It can be unnerving at times but giving patients a goal to work towards allows them to take some of their treatment into their own

hands. I went for walks because it made me feel better in the long run and it was something I had complete control over. I felt that I was doing something to help my body fight the cancer.

That is why I am so thrilled to be a part of the APTA Oncology and the Student and New Professionals Subcommittee, a group dedicated to education and advocates for the patients of oncology rehab. The work being done to improve the quality of life and to make medical advancements in cancer treatment and recovery are so vital. Even the simple act of educating clinicians about special considerations when treating cancer patients is so important because it is a growing field with a growing need. According to NIH, 39.5% of men and women will be diagnosed with cancer in their lifetime and there will be 22.2 million projected survivors by 2030.¹ I am grateful to be a part of a network of people with common passions and goals to my own and I am blessed to be where I am, studying to be a physical therapist and about to celebrate 2 years in remission.

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References

1. Cancer Statistics - National Cancer Institute.
<https://www.cancer.gov/about-cancer/understanding/statistics>. Published April 2, 2015.
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