

THE BLOODLINE WITH LLS

A PODCAST FOR PATIENTS AND CAREGIVERS

Episode: 'Life on Pause: Racheli's Story'

Description:

In her junior year of college and new to Los Angeles, Hodgkin's Lymphoma was the furthest thing from Racheli's mind. Join Alicia and Lizette from The Leukemia & Lymphoma Society (LLS) as Racheli walks them through how a presumed head cold was misdiagnosed. Listen in as she shares how she was able to press ***play*** on her life, with treatment and support from her healthcare team, family and growing online support.

Transcript:

Alicia: Welcome to the bloodline with LLS. I'm Alicia

Lizette: And I'm Lizette. Thank you so much for joining us on this episode titled, "Life on Pause, Racheli's Story".

Alicia: Yes, as Lizette mentioned, we are here with Radiant Racheli, as many may refer to her as, if you're following her on YouTube or Twitter or Facebook.

Let's jump right in. Tell us exactly what's happening, you know, at this period of your life? You're in college, how do you start to feel? What starts going through your mind? Kind of set the scene for us.

Racheli: So, I had just moved to Los Angeles in January 2015 where I was in my junior year of college. And I was there for about two months and then I started to get really sick, and I found a doctor and you know they just said you had a head cold. And I was like okay I'm going to get a Nettie pot and I'm going to feel all better and, unfortunately, I just kept getting sicker and sicker.

I started to form these random symptoms that I didn't know, you know, were cancer, but - so I was kind of overlooking them and seeing other doctors and everybody just said like you have a cold. You have a cold. And then, finally, a doctor said you have bronchitis, so she gave me prednisone which is a steroid, and that made me feel so much better because if you don't know, the prednisone will shrink tumors and clear air

ways for you to breathe and things like that, so it was, you know, kind of treating something, like putting a Band-Aid on something pretty much, and hiding what it really was.

But the cancer went through that and I still kept getting sicker and sicker and I went to the doctor and I had a list of symptoms and things that were happening with my body that I presented to her, and she was like okay, we are going to get bloodwork and an ultrasound. I went that day and I got that and then I went back to her for a follow-up. Two days later she said, "Okay your white blood count is super high, and you've got this lymph node in your neck that's a little bit bigger than I would've liked."

I still didn't put it together that cancer was a possibility though, I was like okay, what - I don't even know what that meant. So that day I went and I got a core needle biopsy in my, in my, in the lymph node in my clavicle. Two days later I go back and I'm sitting there, I'm getting an ultrasound before I meet with the doctor and then she walks in and she tells me that I have Hodgkin's lymphoma, and I didn't really put it together in that second; I knew lymphoma. I think she, actually, she said I had Hodgkin's disease, so I didn't know that that was cancer and I kind of was asking her more questions, and she said it's lymphoma and I knew lymphoma because I had been to the night walks previously and I had a friend whose father passed away from lymphoma. And my first question was - I was in a kickball league like an adult kickball league, and my first question was, "Can I still play kickball?"

So, we talked about that. She gave me a little bit of false hope by telling me that it was going to be easy to treat and that I could do it with pills and things like that, but my family was like you are coming home right now and we are finding you a hematologist oncologist and that's that. And so, I did that, and I think until I hit Florida, it really hit me that I had cancer and I didn't, still in that moment, I didn't think I have to stop school. It wasn't really a reality then.

I still honestly don't believe that I was told that I had cancer. It's kind of a very surreal thing to think about for me. But yeah, that's, that was what was going on in my head then. I didn't, I was deaf to all those sentences and words until I met with my oncologist and things got put into perspective.

Lizette: Do you think the doctor told you that it would be easy to treat because a lot of young adults tend to fare well with the treatments for Hodgkin's lymphoma?

Racheli: Possibly, I personally think in this scenario with her that she had never diagnosed somebody with cancer before and that she was - she seems pretty traumatized to have to tell me that I had cancer - and I think that she was making it okay. In a sense, because never, now that I'm well-versed in Hodgkin's, never ever heard of anybody treating Hodgkin's with pills. So, I just don't think that she really knew, and that she wanted to make it okay, but she did know what it was a treatable cancer, so maybe that's why.

Alicia: And Racheli, I think you bring up a really great point surrounding the topic of second opinions. I know here, at LLS, we encourage patients and caregivers to pursue a second opinion because many times it's what is the thing that improves treatment, you know, improves, improves confidence in someone's journey, or cancer journey. So, I hope our, our listeners are definitely paying attention and jotting down, you know, the importance of, if one doctor seems unsure, or even if one doctor seems to really know it all, getting a second opinion certainly does not hurt the situation.

You mentioned that your family told you, "Hurry up, get back to Florida. During this time, were you, did you locate or identify a doctor in Florida, did your family do so? Explain how you kind of found the connection between, you know, you being where you are, and then getting treatment by an oncologist in Florida.

Racheli: So, my, this is actually a really wonderful story that will paint a picture of my oncologist for you. My brother's very good friend, his name is Arie Grobman, he went to university of Miami for college to be a doctor, and so, he had graduated and now he's a doctor, an ENT at University of Miami Sylvester Cancer Center And whenever we have any medical issues in the family or we need to find a doctor , we always reach out to Arie, And Arie, so we asked Arie, you know does he know a hematologist /oncologist? And Arie gave us Dr. Hoffman's information. And I called Dr. Hoffman's office and the secretary said that Dr. Hoffman was booked out for about a month. That was not okay. It wasn't going to fly with my family to wait you know a month to be seen to even know what stage I was.

So, I got Dr. Hoffman's personal email and I emailed him saying - this was before I even booked my flight to Florida. I emailed him saying and explaining the situation and that my family's in Florida and that I know Arie and all of that. And Dr. Hoffman responds and he says, "I'll see you on Friday."

Alicia: Wow!

Racheli: And he doesn't see patients on Friday. Friday is not a clinic day for him. And so, it was just kind of this, that made me know that like okay this is the guy that I am going to get treated by, and he sat with me that Friday for about two hours just talking to me and answering any question I had and, yeah that, that was my experience with meeting Dr. Hoffman.

Alicia: That's awesome.

Racheli: Yeah.

Lizette: And he knew you traveled all the way because you were in California right, in school.

Racheli: Yeah, I told him I said are you sure that you see me on Friday. I have to book a flight and I need to come in, and he's like, yes. I was like wow holy moly.

Alicia: Wow!

Lizette: And we actually have seen a shift from the doctor as the authority to more patient participation, more questions from patients. Patients realizing that they do have a role in decision-making. How important was it being your own advocate and with your healthcare team because you did take it into consideration that you would have to get an expert, and that's something that we really tell people it's really important to get a second opinion, it's really important to get treated by an expert in the field when it's a blood cancer. Blood cancers aren't the most common, so we do encourage people to seek out an expert. How do you think that affected your treatment?

Racheli: It deeply affected my treatment. I, one of the biggest messages that I give through my channel and my social media presence is to be your biggest advocate because nobody else is gonna be your biggest advocate for you; you speak for yourself, and I learned that through my journey to diagnosis because, at my first appointment with the doctor, when I was having, I was experiencing a "cold" quote on quote. I asked them for an x-ray and I said, There's something in my chest. I feel it." And she was like, "No you have a head cold," and I didn't I didn't push for the x-ray and that was a moment where I wasn't my biggest advocate. And I think I've learned through that and through my diagnosis that I really need to be, and I really try to practice that as much as I can. I was in deep communication with my oncologist and

the entire healthcare team of mine and I would tell them when I'm feeling anything, even if it was the smallest thing. And when I was in the hospital, when it wasn't my oncologist treating me. I always asked questions about what's the medicine that they're giving me. I even have opted out of a few medicines that they've suggested to me, just through research and knowing what the best thing is for me and my body and my healing. And that is one thing that I always say is just be your biggest advocate. If you feel something just, it doesn't hurt to just tell your doctor, or somebody, or your oncologist, or anybody that's helping you with your healing process because something small could be something huge. And I learned that through experience, throughout treatment I formed blood clots in my lungs and I have bleomycin toxicity, which is from one of the chemo's that I got.

So, if I hadn't been my biggest advocate and shared that with my oncologist and my nurses, I would've never found out that I had those things going on in my body. If I had just said oh well, Chemo makes you feel pretty crappy, so I'm just going to let myself feel crappy and I'm not an advocate for, for myself, then it wouldn't of gotten diagnosed. And it starts with that and then you just have to continue. I don't like the way that my nurse is talking to me, can I please see another nurse, can another nurse treat me? I think that's so important. It's so important to, to love who is taking care of you because they're the ones that, ultimately, have your life in their hands and have - will have your best interest, and that's really, really important. It's like Ground Zero, you know?

Lizette: A lot of people don't feel comfortable questioning their doctors or treatment team.

Racheli: Yeah, I know.

Lizette: They feel that they're the experts and, and that's it. But people don't, don't realize that as patients we're the ones that are paying for services and really, you know, we go out there and we look at cars and we, you know, see what kind of car we want what's best for us but we don't know that we could do that with doctors, we don't know that we can actually ask doctors questions and see who's the best doctor for us, you know.

Racheli: 100%.

Lizette: Some people may want a doctor. that's really upfront. Some people may

need a doctor that has a little bit more of a bedside manner, and it's not a bad thing to actually go out there and actually look for a doctor that's right for you.

Racheli: 100%. My. my grandfather actually had cancer and he was diagnosed 2 years before I was, and we then were going through cancer at the same time. But even before I was diagnosed, my grandparents would just listen, and I also think it's a generational thing, but my grandparents would just listen to what the doctor said, put any drug that they told him to in his body, and then think that he would get cured, but, ultimately, that ended up being really bad for my grandfather and we kept telling my grandmother like you are his caretaker. You need to seek other options. We've, we even consulted with my oncologist about my grandfather and we fought my grandmother about asking questions and seeking other doctors and opinions and things like that and she was very, very apprehensive to do that. So, I definitely saw that, and it was kind of like a learning lesson of what not to do, unfortunately, because I realize how important that was then.

Lizette: Yeah. I was going to say it might be a generational thing, but I was thinking Alicia might get mad at me because I'm always talking about millennial's, they think that's a really good thing that.

Racheli: But that's a good thing.

Lizette: Yeah, I think it's a good thing that millennials can actually show us, you know, us older folks that we really should have a voice and be a stronger advocate for our own selves.

Racheli: Uh huh. And even while I'm on, you know, I'm in these Facebook support groups, and on their people will comment, how did you do this, how did you do this treatment? Did you do radiation? A lot of these specific questions to treatments and you, I don't think that you should go there for medical advice or medi- ,or, not advice, but, like, I don't think you should go online to seek your treatment, but it's a wonderful place to bounce treatments off of each other and kind of how one oncologist did it is so different than other oncologists, and to just see - because not one oncologist is the tell all in cancer treatment or, you know, or fertility and all of that. So, it's really awesome to get to talk to so many people, and that could play into the generational thing where we now have these outlets to learn about our diseases and, and all of that. So, I definitely think that it's a generational thing.

Alicia: So, you mentioned Facebook and you mentioned encouraging others to be their own advocate. What motivated you to become active on social media and to use that platform, and when during your treatment?

Racheli: First day that I was diagnosed, I don't know what compelled me to do it, honestly, I just, I just took out my phone and I was recording everything, and I think I wanted it more. In that moment as a sense of kind of trying to relay information to my Facebook friends and my loved ones about what's going on as opposed to updating everybody one by one, and letting everybody know what's going on how chemo is making me feel and all of that, and then it, and then I really wanted to help other people going through it. And then, a few weeks into my treatment, I realized, wow, can I say the word sucks? Yeah?

Alicia: Of course.

Racheli: I was like wow, it sucks to be a young adult, getting treatment and going through cancer or any disease for that instance, and I wanted to be able to be relatable and to be raw on my channel and talk about it. And my theme is overcoming adversity with positivity, but I still showed the really bad parts of it, so that - because there will be bad parts. So it was a way for me to connect with other patients and survivors, and even people not going to cancer, to, to help them understand what it's like and that it's not just like, oh you go, you sit, you get nauseous, you lose your hair, and then you go back to your life afterwards.

So, me sharing my journey with treatment and sharing it with life after cancer is just as important to me as when I first started the day that I was, I was sharing my story, and that's kind of what kept me going and motivated me to continue with it.

Alicia: And I think many people, or many patients look to social media for that aspect, you know, for that purpose of being social. When you're in a hospital or a doctor's office, you are trying to think of, of the abundance of medical terms that you now have to remember, and you have to jot down in your notebook. And I think when someone looks at social meeting, it's a way of accessing an informal and structuralist to a degree setting for others to be vulnerable enough just to kind of join others on their journey and have others join them on their journey.

Here at the LLS we have LLS Community, which is an online community that allows others to log in, you know, by creating a profile, and either getting questions answered

or contributing to a conversation or discussion. It definitely creates a group that allows people to feel comfortable in that space. So, for our listeners today, I definitely encourage them to visit www.lls.org/community for more information about that resource that we offer.

But for you specifically, Racheli, you said that you had created the social media handles on Facebook, YouTube, and Twitter as a way to inspire others and encourage others. What did you find it doing for you in regards to now it being a tool that was helping you gain that strength and you gain that support?

Racheli: It helped me in a few ways. The, the first way that I would say that it helped me is that I've connected with other people going through the same things as me. I've been able to make long lasting friendships. I actually have a group of girls that I met on social media that all had Hodgkin's lymphoma and are now going to be the bridesmaids at my wedding. Like, I have formed unbreakable bonds with some other women and men that have been through what I went through, and it's not that I can't relate to people that didn't have cancer. It's just really helpful and inspiring to be able to text a friend like, oh, I'm itching right now, like is it back? You know what I mean? And if I texted somebody like that that didn't have it, they would be like oh you're freaking out, like its, your fine, blah, blah, blah, blah. But, like, there's these little, little things that are so beneficial to having a cancer community, and it's been so, so helpful to me.

Another thing is I'm the type of person that really loves to help people and to motivate and inspire and it helped me get through it by doing that, so it wasn't a completely selfless act. You know, like it helped me to motivate other people and, you know, to get messages like. Oh, I'm feeling that too, thank you for sharing this and I'm like so happy that I'm not just like talking to the wind and that I actually can relate to these people and we all are sharing the same feelings and emotions and we're all in this together. and that was super helpful to me.

Alicia: How many of your connections became in person connections because I know that you said the group of females that are now becoming your bridesmaids?

Racheli: Well there's both, so there are people that I haven't met; we're, we're all spread across the world.

Alicia: Yeah, I can imagine.

Racheli: Yeah. So, there's I would say I can actually probably count. There's the seven girls that are in my party.

Lizette: Seven? Big wedding party.

Racheli: Seven of them. Well, we're not having people like walked down the aisle and stand at the, like up at the front so it's really just more of a pictures and being together to get ready kind of thing to, to be special.

Lizette: Okay.

Racheli: But I never wanted a wedding party that that but then I have these best friends now that, you know, we all, we're all so close. So there's the seven of them and then there's some, there's my friend Zach who was my first cancer friend that actually wasn't through social media. And then, I would say like around 8 to 10 people I've met because I was in Vegas once and I shared that on social media and there was a cancer survivor there that knew me from the Facebook group or from my videos or something and she was like, "Hey, can we meet?" And I was like, "Yeah, I'm at the, the Ferris wheel coming out," and that was really cool, so.

Lizette: That's great. It really sounds like cancer has really shaped a new you, a new normal; people say new normal all the time. How do you feel about that?

Racheli: I think that it's true. I don't think that life went back to the way that it was before or when I finished treatment. There's still so much for me to deal with, and there are long-term side effects, long - that include emotional struggles, and it didn't it didn't just go back. I was. I thought of this analogy, like watching a movie and then hitting pause and then like going out to do something or going on with your day and then coming back home later that night and hitting play. So much of what you already watch doesn't stick with you when you go and do all your things, and I'm - it's still the same movie and it's still the same characters but you're not. You. you need to like re-watch it to really feel the emotions and everything, all the events that happened, and, and, and all of that to really love what you're continuing to watch or remember, or have it stick with you as much as it would if you just hit play the entire time, and you went and did things in that time where you hit pause; so there's so much happening, and then you come back. You know what I mean?

So, I of, course, I'm the same me, I'm, still Racheli, I still love a lot of the same things that I did before, but there's so much more to me now, and yeah, I'm, I am still figuring out my new normal. I'm still figuring out how to deal with, like I said, like feeling itchy and not going to think that I have cancer again or – cause for those of you that don't know, itchiness is a symptom of Hodgkin's and it's one of the ones that I had that was very prominent in my leading up to my diagnosis. So, that's one of those traumatizing feelings that sticks with me and, you know, especially having been in the middle of my college career, when I was diagnosed, and putting that on pause and then needing to come back to that, was one of the hardest things ever. And it wasn't hard in the sense that school was hard, it was hard to be in a classroom learning about things after I'd been through something so life-changing, where I learned so much to be like this stuff doesn't affect me on the day, on the daily basis. I, you know, I just went through something huge, like I was shown what really matters, and now I'm in this classroom and we're like analyzing an essay, like, you know. That was something that I struggled with when I went back this past semester. And, and, yeah, friends change, you lose friends, you gain friends. There's a lot that changed and I am - it's not the same normal, so still figuring it out.

Lizette: Well , it sounds like, you know, you've been able to touch a lot of lives, and here at the Leukemia and Lymphoma Society, we also, of course, want to touch people's lives during treatment, when people are diagnosed, and throughout the whole journey and social media. I think you helped a lot of people on social media. I know here we do have our community, our online community where people can talk about their diagnosis and really know that they're not alone, like you said, it's really something when you know that you're itching and somebody else is, you're not the only one. We also have a Patty Robinson Kaufmann First Connection program where people that are newly diagnosed, if they want to speak to somebody that's diagnosed for a while with the same diagnosis or similar diagnosis, can speak to someone on the phone, and that makes it real. Not in a bad way, it just makes it real that there's somebody else that understands. You know, your family is there to really support you but isn't it different, talking to somebody that has gone through some of the things that you've gone through?

Racheli: It is so incredibly different and, you know, your families there and they see what's going on, so it's not like they don't know but I don't think that they understood, or, and they -everybody still has their lives going on. Everybody. you know, they were still going to work, they still had their friends that they needed to hang out with and talk with and everybody's lives kept going and, of course, my family, for instance, they

were there for me. You know my brother was driving me to treatment; it was just as real to him as it was to me, but I always say we experienced it very differently. And he may have had, or my mother may have had a very hard time, and they have their own struggles that they needed to get through. But they were very different struggles than mine were, you know.

So, it's so different to talk to somebody that actually went through it and that actually knows the feeling of getting your port, you know, knows the feeling of sitting there for chemo and getting nauseous and tired, knows the feeling of losing her hair, like that's. Although my family saw me lose my hair and was traumatizing for my mom and all of that. It's so different needing to walk around bald every day and actually feel that than the opposite. And then that, like then, then a family member being around for it. They got it, they knew that it was terrible, but it's a very different kind of relatability to talk to somebody that actually knows.

Lizette: And to actually give people like the little inside scoops that usually your doctor doesn't give you. Your doctor's telling you about the protocol, they're telling you about the possible side effects. But they don't tell you that, oh, you may want to take a snack that day to treatment, or just like talking to people about the real, everyday things. Have you found that you told a lot of people things or you've gained knowledge from other people and made it easier for you?

Racheli: Yeah, I hope so. I, I actually, recently, so I write a column for – can, can I can add this? Okay. I write a column for *Lymphoma News Today*, and it's a weekly column, and I recently wrote an article like things I wish I knew when I, before I was diagnosed or – it was something like that. And it was all about like the little tips and tricks to get through treatment, like the smoothies and, you know, this, this one, nobody told me, like to. I couldn't eat with metal forks or spoons because the metallic taste in my mouth, so it would taste really bad. So I was eating with plastic silverware throughout my entire treatment, and that was something that I figured out on my own, and I was like, that's not working for me, let's try plastic, and it worked. And now I tell everybody about that, if they're tasting that, or like to chew gum when I'm getting my port flushed because the taste doesn't taste well, or it, it tastes really bad; I used to throw up from it. And little things like that are things that you don't necessarily know off the bat or are told, so I've been really fortunate to be able to bounce those kinds of tips off with my, with my cancer friends, you know, to talk about that. It's been so helpful. We teach each other every day. I learn something new every single day that I'm on social media when it comes to my diagnosis and my

treatment and what not.

Alicia: Right, and social media's such an amazing thing if, you know, used well. So, to hear that –

Racheli: Oh yeah.

Lizette: So, to hear that you're impacting so many lives in such, a, in such a real way. I mean we, we see Facebook, we hear about Instagram, we hear about Twitter, we know that these things exist, but I don't think people take it to the level of experiencing treatment together experiencing such real-life issues together. And I think that's an amazing thing that you're doing, that you're impacting so many lives. So, if people want to join you on this journey and want to connect with you and want to hear your stories, just, you know to gain motivation, what are, what are your handles, your social media handles?

Racheli: So, I'm quite active on YouTube. That's where I share most of my content, and you can just - I don't have a link unfortunately, I'm not there yet. You have to have a certain amount of subscribers to get those perks. But, if you just search on YouTube Radiant Racheli, which is R A D I A N T and then spacebar, and then R A C H E L I. And my Instagram, I'm also quite active on there, I'm a new fan, I'm a new-found fan of Instagram stories. I really love those. So, that's also Radiant Racheli. So, it's just the @ handle and then Radiant Racheli, which is R A D I A N T R A C H E L I. And I'm also active on Facebook, which is just Facebook.com/RadiantRacheli. Do I need to spell it again?

Alicia: No.

Racheli: Okay.

Alicia: That was great.

Racheli: And, yeah, I would love to connect, and I love, I love getting messages and talking with other people going through it. So, if you're listening and if you need somebody to talk to or anything like that, I am, I'm pretty active on, on the media, on the social media, so please reach out to me and let me know that you came from this podcast; that would be so awesome to know.

Lizette: Now you put your life on pause, but we really want to let people know that are newly diagnosed, they feel that now their life isn't going the way that they planned it to be, that you were able to put your life on pause but still come back, still be you and still add to who you were and still become successful and still go through school and now, congratulations you got a new job and you're getting married.

Racheli: I am.

Lizette: There's a lot, of great things going on for you, so we do let people know that there is hope, there is hope.

Alicia: If you had to tell somebody one thing if they area first diagnosed, what would you tell them?

Racheli: Everything's gonna be okay. 100%. And I know that things may not feel okay. Or like how could things be okay when life is so hard right now, but it will be. And it may not be okay in the way that you thought it was gonna be, but that's okay. That's life; we have ups and we have downs. And another big thing that I try to advocate for is to not stress over things that you can't control, and to just focus and put your love and energy into what you can control. And you can control your mindfulness and your attitude and your energy and the way that you go through things. And I, I was single when I was diagnosed, and I thought that cancer was going to be the end of my dating life, and it was hard to date during cancer, and it was hard to date after cancer. And then, randomly, I met this wonderful man and we're getting married. And you know it's things like that, that make, that make life come back to normal and realize that everything is going to be okay, I'm going to get through this, and there will be happy times. But you can't deny the fact that in life, whether its cancer or not, we're going to have struggles and we're going to come back from them and be okay.

Alicia: Racheli, thank you so much for sharing your story with us today. Your journey is affecting many in such a great way. It's important for others to know that we're all in this together, that there is information and that there are people out there who can experience this with them.

So, we want to thank you for what you do, thank you for joining with us today.

Racheli: Thank you so much, and thank you for what you do and, you know, putting

on things like this. It means the world to me and to other cancer patients, and I really appreciate that.

Lizette: Thanks for your an inspiration. It' so hard to do what you're saying, like to change your mindset, just so hard to do because, you know, you wake up, you're having a bad day, everything is negative, and you're like, how can I turn this into a positive? And it's really hard, so.

Alicia: Right.

Lizette: Well, it's okay to be pissed when you're diagnosed with cancer, right?

Racheli: Of course, of course. Oh my gosh, I was so pissed. We were all so pissed, but I just think it's the way that you got through it. Like, I've met people who had the same diagnosis as me, same treatment plan and all of that stuff, same ages, but handle it not with a positive mindset. And it's not to say you can't be negative. Like, if you look on my YouTube channel, there's videos of me like crying and being angry, and that's, that's okay but it's like how you get through. It's like the overall, you know, mentality and they had a very different experience than I did and, you know, they're much more negative and upset now. And I just don't think, for me personally, that's no way to live my life because I still, I'm 23. I still have so much to live and, I'm not going to let the cancer or the deaths or the divorce or like all the negatives; I'm not going to let that affect the rest of my life. And that was really important for me, and it was a decision that I needed. I needed to make and, you know, and hold on to., so. But it's hard. It's not easy.

I always say my core is positive, and sometimes I get out of my core, but I can always come back home, and, and that's kind of it because of course, of course, I have negative moments and days and emotions, but.

Alicia: Which is why I love that you're using your social media for the purpose of bringing others through that because people only have a certain amount of time with their healthcare team. The healthcare team tells them side effects, treatment, and then, if they don't have people outside of that to kind of bring their mindset back to you're going to be okay, it becomes a journey that's 10 times harder than it could have been if they just had that support and that information and that insight from other people who are experiencing the same things.



Rachel: 100%

Alicia: You did an awesome job, Racheli.