

When the Caregiver Becomes the Patient: Teresa's Lung Cancer Story

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Teresa Walker loved her job as a patient care assistant in the oncology department of her local hospital. And even though she was close to retirement age, she enjoyed taking care of her patients too much to ever think about giving it up.

After 13 years, Teresa was able to anticipate her patients' needs – from keeping them comfortable after surgery to offering a kind shoulder to lean on during a difficult time. But the one thing she couldn't anticipate was her own diagnosis with advanced non-small cell lung cancer.

It all started during a routine trip to the grocery store. Teresa was driving home when she was hit by another car from behind. While she didn't have any serious injuries from the accident, her head started to hurt, so she decided to go to the emergency room to make sure everything was okay.

At the hospital, a CT scan revealed she had a mass on her lungs that had spread to other parts of her body. Suddenly, Teresa found herself in the shoes of the patients she cared for so well.

Teresa's sister Joyce and her husband Robert were with her when the oncologist delivered her official lung cancer diagnosis. They remember that Teresa, who is normally very strong, was devastated by the news.

"When I found out I had lung cancer, I just went numb. I was shocked," says Teresa. "Even though I helped people with this disease every day, I didn't see it coming for me because I didn't have any symptoms."

Teresa (seated) and her husband Robert (standing)

“Teresa has a lot of inner strength, but I saw the fear in her eyes and I knew I had to stay strong

for her,” says Joyce. “I just set myself to thinking – ‘she’s not going anywhere without me’ and I got on with researching the treatment her doctor thought she should start.”

Deciding on a Path Forward

Teresa’s oncologist, Dr. Adam Lye, recommended KEYTRUDA[®] (pembrolizumab) with chemotherapy.

KEYTRUDA is a prescription medicine used to treat a kind of lung cancer called non-small cell lung cancer (NSCLC). KEYTRUDA may be used with the chemotherapy medicines pemetrexed and a platinum as your first treatment when your lung cancer that has spread (advanced NSCLC) and is a type called “nonsquamous” and your tumor does not have an abnormal “EGFR” or “ALK” gene.

KEYTRUDA with chemotherapy helps fight advanced cancer in two different ways. KEYTRUDA is a type of immunotherapy that works by blocking the PD-1 pathway to help prevent cancer cells from hiding. KEYTRUDA helps the immune system do what it was meant to do: detect and fight cancer cells.

KEYTRUDA is a medicine that may treat certain cancers by working with your immune system. KEYTRUDA can cause your immune system to attack normal organs and tissues in any area of your body and can affect the way they work. These problems can sometimes become severe or life-threatening and can lead to death. You can have more than one of these problems at the same time. These problems may happen anytime during treatment or even after your treatment has ended.

Call or see your health care provider right away if you develop any signs or symptoms of the following problems or if they get worse. These are not all of the signs and symptoms of immune system problems that can happen with KEYTRUDA: lung problems; intestinal problems; liver problems; hormone gland problems; kidney problems; skin problems; problems can also happen in other organs and tissues; infusion reactions that can sometimes be severe or life-threatening; rejection of a transplanted organ; and complications, including graft-versus-host disease (GVHD), in people who have received a bone marrow (stem cell) transplant that uses donor stem cells (allogeneic). Getting medical treatment right away may help keep these problems from becoming more serious. Your healthcare provider will check you for these problems during treatment with KEYTRUDA. They may treat you with corticosteroid or hormone replacement medicines and delay or completely stop treatment with KEYTRUDA if you have severe side effects. Please see Important Safety Information for KEYTRUDA below.

Finding the Right Treatment Approach for Teresa

After Dr. Lye helped Teresa understand the potential treatment options, she and her doctor agreed to start KEYTRUDA with chemotherapy.

“Teresa and I thoroughly discussed the various treatment options available to treat her advanced non-small cell lung cancer,” explains Dr. Lye. “Together, we decided that KEYTRUDA with

chemotherapy was the best option for her.”

In a clinical trial of KEYTRUDA with chemotherapy, more patients with advanced nonsquamous, non-small cell lung cancer lived longer and saw their tumors shrink than those taking chemotherapy alone. Specifically, the results of the clinical trial showed that 69% (283 out of 410 patients) of patients taking KEYTRUDA with chemotherapy were alive compared to 48% (98 out of 206 patients) of those taking chemotherapy alone. Further, 48% (195 out of 410 patients) of patients taking KEYTRUDA with chemotherapy saw their tumors shrink compared with 19% (39 out of 206 patients) of those taking chemotherapy alone.

Before you receive KEYTRUDA, tell your health care provider if you have immune system problems such as Crohn’s disease, ulcerative colitis, or lupus; have had an organ transplant or have had or plan to have a bone marrow (stem cell) transplant that uses donor stem cells (allogeneic); have had radiation treatment in your chest area; have a condition that affects your nervous system, such as myasthenia gravis or Guillain-Barré syndrome.

If you are pregnant or plan to become pregnant, tell your health care provider. KEYTRUDA can harm your unborn baby. If you are able to become pregnant, you will be given a pregnancy test before you start treatment. Use effective birth control during treatment and for at least 4 months after your final dose of KEYTRUDA. Tell them right away if you think you may be pregnant or you become pregnant during treatment with KEYTRUDA. Tell your health care provider if you are breastfeeding or plan to breastfeed. It is not known if KEYTRUDA passes into your breast milk. Do not breastfeed during treatment with KEYTRUDA and for 4 months after your final dose of KEYTRUDA. Tell your health care provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Common side effects of KEYTRUDA when given with certain chemotherapy medicines include feeling tired or weak; nausea; constipation; diarrhea; decreased appetite; rash; vomiting; cough; trouble breathing; fever; hair loss; inflammation of the nerves that may cause pain, weakness, and paralysis in the arms and legs; swelling of the lining of the mouth, nose, eyes, throat, intestines, or vagina; mouth sores; headache; weight loss; stomach-area (abdominal) pain; joint and muscle pain; and trouble sleeping. These are not all the possible side effects of KEYTRUDA. Talk to your health care provider for medical advice about side effects.

Taking On Lung Cancer Together

As Teresa started treatment, Joyce and Robert became her biggest supporters and quickly established a routine around her care, with Robert driving her to each appointment and Joyce staying by her side during each treatment, chatting or just quietly watching TV. Teresa says that on treatment she sometimes feels tired, but her family’s love helps her to stay strong.

Teresa is especially thankful for Joyce’s consistent presence, even when she insists she is okay alone. “It was hard accepting Joyce’s help at first because I was used to being the one taking care of people with cancer. But I’m glad she’s here, getting me through this tough time.”

After standing together against Teresa's lung cancer, it was fitting that Joyce and Robert were with Teresa when Dr. Lye shared the good news: they received the results of her first scans. "When Dr. Lye told us, there were happy tears all around," says Teresa.

Experiences with KEYTRUDA differ among individuals. KEYTRUDA will not work for everyone, and it's important to be informed about possible side effects. Always talk to your doctor or health care team if you have questions about your treatment.

Teresa is grateful for her family, the doctors and nurses who have stood by her – and who continue to support her today. "Everyone has taken such great care of me. It feels like all those years I spent looking after people with cancer have come right back to me – filling me up with so much love."

When asked what advice she has for others facing a similar journey, Teresa says to stay strong. "If you find yourself diagnosed with advanced non-small cell lung cancer, don't give up. And definitely get someone in your corner to take on the cancer together."

To learn more about advanced non-small cell lung cancer and KEYTRUDA, visit www.KEYTRUDA.com.

FDA-Approved Indications

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EGFR = epidermal growth factor receptor; ALK = anaplastic lymphoma kinase.

Important Safety Information

KEYTRUDA is a medicine that may treat certain cancers by working with your immune system. KEYTRUDA can cause your immune system to attack normal organs and tissues in any area of your body and can affect the way they work. These problems can sometimes become severe or life-threatening and can lead to death. You can have more than one of these problems at the same time. These problems may happen any time during treatment or even after your treatment has ended.

Call or see your health care provider right away if you develop any signs or symptoms of the following problems or if they get worse. These are not all of the signs and symptoms of immune system problems that can happen with KEYTRUDA:

Lung problems: cough, shortness of breath, or chest pain.

Intestinal problems: diarrhea (loose stools) or more frequent bowel movements than usual; stools that are black, tarry, sticky, or have blood or mucus; or severe stomach-area (abdomen) pain or tenderness.

Liver problems: yellowing of your skin or the whites of your eyes; severe nausea or vomiting; pain on the right side of your stomach area (abdomen); dark urine (tea colored); or bleeding or bruising more easily than normal.

Hormone gland problems: headaches that will not go away or unusual headaches; eye sensitivity to light; eye problems; rapid heartbeat; increased sweating; extreme tiredness; weight gain or weight loss; feeling more hungry or thirsty than usual; urinating more often than usual; hair loss; feeling cold; constipation; your voice gets deeper; dizziness or fainting; changes in mood or behavior, such as decreased sex drive, irritability, or forgetfulness.

Kidney problems: decrease in the amount of your urine; blood in your urine; swelling of your ankles; loss of appetite.

Skin problems: rash; itching; skin blistering or peeling; painful sores or ulcers in your mouth or in your nose, throat, or genital area; fever or flu-like symptoms; swollen lymph nodes.

Problems can also happen in other organs and tissues. Signs and symptoms of these problems may include: chest pain; irregular heartbeat; shortness of breath; swelling of ankles; confusion; sleepiness; memory problems; changes in mood or behavior; stiff neck; balance problems; tingling or numbness of the arms or legs; double vision; blurry vision; sensitivity to light; eye pain; changes in eyesight; persistent or severe muscle pain or weakness; muscle cramps; low red blood cells; bruising.

Infusion reactions that can sometimes be severe or life-threatening. Signs and symptoms of infusion reactions may include chills or shaking, itching or rash, flushing, shortness of breath or wheezing, dizziness, feeling like passing out, fever, and back pain.

Rejection of a transplanted organ: Your health care provider should tell you what signs and symptoms you should report and they will monitor you, depending on the type of organ transplant that you have had.

Complications, including graft-versus-host disease (GVHD), in people who have received a bone marrow (stem cell) transplant that uses donor stem cells (allogeneic). These complications can be serious and can lead to death. These complications may happen if you underwent transplantation either before or after being treated with KEYTRUDA. Your health care provider will monitor you for these complications.

Getting medical treatment right away may help keep these problems from becoming more serious. Your health care provider will check you for these problems during treatment with KEYTRUDA. They may treat you with corticosteroid or hormone replacement medicines. They may also need to delay or completely stop treatment with KEYTRUDA if you have severe side effects.

Before you receive KEYTRUDA, tell your health care provider if you have immune system problems such as Crohn's disease, ulcerative colitis, or lupus; have had an organ transplant or have had or plan to have a bone marrow (stem cell) transplant that uses donor stem cells (allogeneic); have had radiation treatment in your chest area; have a condition that affects your nervous system, such as myasthenia gravis or Guillain-Barré syndrome.

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Tell your health care provider if you are breastfeeding or plan to breastfeed. It is not known if KEYTRUDA passes into your breast milk. Do not breastfeed during treatment with KEYTRUDA and for 4 months after your final dose of KEYTRUDA.

Tell your health care provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Common side effects of KEYTRUDA when given with certain chemotherapy medicines include feeling tired or weak; nausea; constipation; diarrhea; decreased appetite; rash; vomiting; cough; trouble breathing; fever; hair loss; inflammation of the nerves that may cause pain, weakness, and paralysis in the arms and legs; swelling of the lining of the mouth, nose, eyes, throat, intestines, or vagina; mouth sores; headache; weight loss; stomach-area (abdominal) pain; joint and muscle pain; and trouble sleeping.

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You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call [1-800-FDA-1088](tel:1-800-FDA-1088).

Please read the accompanying [Medication Guide](#) for KEYTRUDA and discuss it with your doctor. The physician [Prescribing Information](#) also is available.

Intended for U.S. audiences only.

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