

the US). Instead, the autumn visit involves an extensive list of checks, none of which would appear on any list of guidelines for an annual health examination. (Most of *those* will be performed during the post-Florida checkup come spring.) No, this visit is simply for peace of mind.

Sometimes my examination during such a visit reveals that treatment changes are needed, including perhaps the discontinuation of one or more medications. Yet some patients refuse to make the recommended changes or to accept any other investigations because they, too, might point to the need for changes in treatment. This behaviour might seem puzzling, but it seems that changes in medication, including the elimination of drugs, would void the patient's health insurance for the winter.

It thus appears that one of our roles is to enable our patients to enjoy the cheapest possible winter in Florida while enriching insurance companies, pharmaceutical manufacturers and "health care providers" south of the border.

John Forster, MB, BS Port Perry, Ont.

# Patient guide available

James Lunney¹ will be pleased to learn that at least one booklet about unconventional therapies is available for patients. A Guide to Uncoventional Cancer Therapies was produced by the Ontario Breast Cancer Information Exchange Project in 1996. Copies are available through R & R Book Bar, 14800 Yonge St., Aurora ON L4G 1N3; tel 905 727-3300; fax 905 727-2620. The cost of the book is \$15 plus shipping and applicable taxes.

### Judith MacPhail, RN, BAS

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## Reference

1. Lunney J. Evaluating unconventional therapies. *CMA7* 1998;159(7):758-9.

# "Yes" to exercise for breast cancer survivors

Donald McKenzie's article about dragon boat racing¹ confirms my experience over the past 30 years

in caring for patients who have undergone mastectomy. The generally accepted wisdom is that the affected arm should not be used in a normal manner and certainly should not be used for exercise. This advice is based on the suspicion that exercise will cause lymphangitis or inflammatory lesions.

I have not found this to be the case. I advise patients to use the affected arm normally. However, I do suggest that the arm be protected from excessive ultraviolet radiation, insect bites and cat scratches. In addition, I caution against using the affected arm when blood samples are withdrawn for diagnostic purposes.

It's always tempting for the expert to say "no" to a patient, but I am usually able to say "yes" to inquiries about normal activity and exercises.

# Charles M. Godfrey, MD Post Mastectomy Unit Princess Margaret Hospital Toronto, Ont.

#### Reference

 McKenzie DC. Abreast in a Boat — a race against breast cancer. CMAJ 1998;159 (4):376-8.

