

John J.

FIRST PERSON: GERALDINE FERRARO

Waging a campaign against cancer



Geraldine Ferraro

Until she went public with her cancer diagnosis in June 2001, Geraldine Ferraro was best known for being the New York Congresswoman who became the nation's first female vice presidential nominee for a major party nearly 20 years ago. Today, strangers stop her on the street to ask how she's feeling, and she takes every opportunity to promote research and awareness of the rare disease she's facing.

Ferraro, a patient of Dana-Farber's Kenneth Anderson, MD, has put a public face on multiple myeloma, a blood cancer that was considered virtually untreatable 40–50 years ago but that has benefited from the development of new therapies – including two experimental drugs Ferraro has taken.

"I practically get down on my knees every night and thank God for Ken Anderson," Ferraro says of the director of DFCI's Jerome Lipper Multiple Myeloma Center and an authority on the illness. About 45,000 people in the United States are currently living with multiple myeloma, a cancer of the plasma cells that help make up the immune system.

A lawyer by training, Ferraro, 68, heads the public affairs division of the Global Consulting Group in New York City. She talked recently with *Paths of Progress* Editor Debra Ruder about her cancer experience and faith in the future.

I don't consider myself a survivor; that's someone who has gone through something terrible. People who live through transplants or disasters like Sept. 11 are survivors. I have been extremely lucky; I am a person who is currently living with a cancer that is under control.

I was diagnosed in November 1998 when I finally went in for my annual checkup after losing my primary race for the Senate. My internist said, 'If there's nothing wrong, you're not going to hear from me.' Then a few days later he called and said, 'I've been going through your blood tests from the last couple of years, and I find a very disturbing pattern. You have either leukemia, lymphoma, or multiple myeloma.'

I knew what leukemia and lym-

phoma were, but I had never heard of multiple myeloma. I went into my husband's office, and his reaction was one of almost terror. We've been married 43 years, and we're best friends. I said, 'Don't worry, they can deal with this stuff; it's going to be fine.'

We met with my doctor and talked about the prognosis. 'You're going to read that the survival rate is three to five years, but you don't have to believe it, because I have patients who've had it for 15 years and are doing well,' he told us. When we asked if there is any cure, he said, 'No, but there are things that can be done.'

I had a bone marrow biopsy in New York, and my physicians urged me to consider having Dr. Anderson

at Dana-Farber oversee my treatment. I remained symptom-free until about June 2000, when they put me on steroids. Those worked for four months, then I reached a plateau. So I went to Boston to discuss having a stem cell transplant. I thought I had no alternative, but Dr. Anderson said thalidomide [the drug linked to birth defects in the 1950s, but effective against certain illnesses] had worked with people who'd undergone transplants – and that it could be taken without having one. He suggested trying this oral form of chemotherapy, which kept things in check for a year-and-a-half.

Revealing the truth

At first, I kept news of my situation to a limited group of friends

A PATIENT'S STORY

and relatives; I didn't want people to treat me differently. I had two-and-a-half years to deal with it within my family, and I needed that time.

In June 2001, I went public after Kathy Giusti, president of the Multiple Myeloma Research Foundation, called me and said, 'We're really having trouble getting congressional hearings, is there anything you can do?' I suspected that if I disclosed my cancer and planned to testify, the foundation would get its hearing, and it did. My daughter Donna was working at NBC at the time, and we gave "Dateline NBC" an exclusive.

People were just amazing. I was fascinated by the attention given to the hearing [before a Senate appropriations subcommittee], and I was overwhelmed by

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the number of e-mails, letters, and phone calls. Since then, I've done a tremendous number of interviews and am contacted regularly by people who find out they've got multiple myeloma. It's added another dimension to my life. If I'm getting on an elevator, somebody may turn to me and say, 'You're Geraldine Ferraro? How are you feeling?' It's very sweet.

There were three reasons for my going public: One was to heighten awareness about this disease so doctors can recognize it when their patients have blood work done during regular checkups. Another was to raise money from the government, and the third was to encourage faster FDA approval of drugs.

At the time of the congressional hearing in 2001, Ken Anderson predicted that in five years, multiple myeloma will be a chronic, treatable disease that one lives with – much like diabetes and high blood pressure. To be frank, I think that's happening right now. And with the new testing and research that's going on, I see a cure on the horizon.

I'm now on a clinical trial for the drug Revimid, and it seems to be working. I'm a happy camper because by doing this I have an opportunity to be on the cutting edge of research. They didn't use thalidomide five years ago, and three years ago, Velcade [a medication showing dramatic results against multiple myeloma] had not

yet been approved for use. I guarantee that when the clinical trials for Revimid are over, I'll be advocating for its approval as quickly as possible. ✓

Drawing strength

I've been surprised by how many people know someone who has multiple myeloma, and some of them are in national positions where it's easier to make a difference – like Sen. Kay Bailey Hutchison of Texas, whose brother has the disease. [Hutchison, Sen. Barbara Mikulski of Maryland, and others co-sponsored a bill – the Hematological Cancer Research Investment and Education Act of 2001 – that aims to expand blood cancer awareness and research.] When people call and say they're depressed, I reply, 'Wait a minute; we're lucky.' This is a disease that is beginning to move because of Ken Anderson and others.

I attended an advocacy day in Washington this past summer for leukemia, lymphoma, and multiple myeloma. The focus was on drug coverage and people who fall between the cracks. Drugs like thalidomide are fabulously effective, but they're also fabulously expensive and off-limits to people who can't afford them or who don't have insurance. I'd like to see something done. So I nag everyone about that.

What are my sources of strength? My husband and my three kids, my health-care team, and my religion. My desk drawer is filled with all kinds of prayers. People have put me on prayer lists in houses of worship, and the nuns at the schools where I went are praying for me! I do believe in the power of prayer.

My husband and daughter Laura insist on coming with me to my monthly appointments at Dana-Farber. The nurses are wonderful, as are the pharmacy staff, receptionists, and volunteers. And it's not only with me; I see them with all the patients. I think that makes the difference. If you believe somebody cares about you and feels your life is worth saving, how can you give up? ☺

Geraldine Ferraro (right) shares a laugh with Dana-Farber's Cynthia Medeiros, LICSW, and Kenneth Anderson, MD.

