

October 2011  
**Inaugural Issue**

**Pink**

magazine for Ever

# *Faces of Victory*

**BILL BASTAS**  
**"The Perfect Match"**

**PINK...**  
**The New Black**

**Cover Girl**  
**Contest Winner**  
**Kay Garcia McAnally**  
**TELLS HER STORY**

**Returning To Work**  
**Breast Reconstruction**

# Contents

---

October 2011

- 2** Letter from the Editor
- 4** Returning to Work
- 6** Breast Reconstruction  
Know your options
- 10** C4YW  
Annual Conference 2012
- 11** Young Women Affected  
by Breast Cancer Contest Rules
- 12** Cover Girl Contest Winner  
Kay Garcia-McAnally
- 14** Why the Color Pink?  
Kristie McFarling
- 16** Pink Links  
Helpful Resources
- 17** The Perfect Match  
Bill Bastas
- 18** PINK....  
The New Black







*magazine for Ever*

## *Letter From The Editor*

*I am thrilled to write my first editor's letter to you, the readers of Pink Magazine for Ever! This magazine is in celebration of a family member who I loved dearly, she lost her battle to breast cancer, she was Ever Hancock and she is why I will always be pink for Ever.*

*I look forward to the ways in which this magazine will celebrate, elevate and represent the beauty and strength of so many women. I want you to know that I am committed to working with our team to reflect the truth of your lives in words, images, and ideas that uplift and empower.*

*I look forward to bringing you such exclusives and surprises in every issue. You may email me anytime at [ommaney@mypinkmag.com](mailto:ommaney@mypinkmag.com) and let me know how you're feeling about the magazine. Be sure to tell me what you love and what you'd like to see more of. I'll be counting on you in the months ahead to help us celebrate you.*

— Ommaney Smith

*Founder and Editor-in-Chief*





# Returning To Work

- Give your employer or manager advance notice (if possible) of when you need to take time off work. This makes it easier for more flexible working arrangements to be made.
- Take the time or days off that you need to recover, then go back to work when you are ready.
- Know that some colleagues may deal with a cancer diagnoses with understanding and helpfulness; others may feel uncomfortable or awkward around you because of your cancer, they may not even want to deal with your cancer at all.
- Know that some people mean well, but don't know the right thing to say.
- If a colleague's unhelpful attitude or actions get in the way of doing your job, try to ask your manager for help to address this.

Tips for employers, managers or colleagues:

- Ask your colleague with cancer if they want to discuss their diagnosis; look for clues that they want to talk.
- Let them know that you are there to give them support if needed.
- Talk about topics other than cancer. Having cancer may not mean your colleague has lost interest in their favorite sport, TV shows and politics. For example use appropriate humor!
- Most women just want to be treated normally, not singled out as a cancer victim. Allow your colleague privacy and quietness if they seem to be a bit 'down', this is to be expected from time to time as they come to terms with the trauma of a cancer diagnosis and treatment.
- Don't be afraid to suggest professional help. This may be beneficial if your colleague displays prolonged anxiety, stress, frequent crying, or complains about several weeks of having difficulty sleeping. ■

*The*

he impact of a breast cancer diagnosis on work life varies from woman to woman. For some, the effect might be minimal. You may have an understanding manager, flexible work arrangements, and encouraging co-workers to support you through your treatment. Other women going through the experience of breast cancer may not be quite so fortunate. For these women there may be questions about how to manage treatment and work. What do you tell your manager? How much time should you take off from work while having treatment? You may have financial pressures requiring you to work.

Tips for talking to your employer, manager or colleagues about breast cancer:

- Ask for information from your doctors and nurses about your cancer and the likely effect treatment will have on the amount of time you will need to recover and your ability to return to work in your current job.
- A discussion with your employer or manager before or shortly after your return to work will be useful to clarify expectations.

Owned & Operated by Cancer Survivors!  
Highly recommended by doctors, nurses and social workers  
in the Oncology field.

# TOP THIS!

WIGS, HAIR REPLACEMENT,  
SALON & MASSAGE



*Salon of Beauty and Wellness!*

Serving the whole community.  
Specializing in those undergoing  
treatment for cancer.

7301 Burnet Rd. Suite 107 / Austin, Tx. 78757  
phone: 512.458.8671  
[www.topthisaustin.com](http://www.topthisaustin.com)



LINDI<sup>®</sup>  
SKIN



*DaMi*<sup>™</sup>  
SKINCARE



# Breast Reconstruction: *know your options*

by Ommaney Smith

**Maybe your world has just turned upside down. You heard your surgeon say the words breast cancer or mastectomy and you've barely registered what else was said.**



r perhaps you are already a strong and sparkling breast cancer survivor. You have faced and endured not only this frightening disease, but also the loss of a breast, and along with it a sense of disfigurement or loss of sexuality.

The experience of breast cancer is highly individual and personal and a woman's response to the loss of a breast may surprise even herself. Needless to say no one method of restoring the missing breast(s), whether it be by prostheses or surgery, is suitable for all women.

What I hope this article achieves is an awareness of why women may choose reconstruction, what options are available, and most importantly a sense of empowerment and strength to hopefully diminish some of the fear that surrounds breast cancer.

Why consider breast reconstruction: Breast reconstruction is not for everyone. For some women, surviving the disease is enough

power and satisfaction in itself; their scars bearing testimony to what a determined mind and body can overcome. For a great number of women however, breast reconstruction can be an immensely physically and psychologically rewarding procedure. It can help bring closure to the cancer experience by improving her self-image, self-confidence and quality of life.

You must know at the outset that no reconstructed breast will ever be the same as the breast that was removed. A good reconstruction however can be relatively natural-looking, attractive and well-proportioned. Scientific studies show that the great majority of women who have breast reconstruction are glad they did and felt it very worthwhile.

The ultimate decision is of course up to the individual woman. What all women in the United States do deserve is to be given the choice to opt for reconstruction if they wish. I would encourage you to ask for a referral to a plastic surgeon to discuss your options, even if you feel that surgery may ultimately not be right for you.



## THE INITIAL STEP: CHOOSING A PLASTIC SURGEON YOU CAN TRUST

Breast reconstruction involves a number of choices. The first and most important is choosing your plastic surgeon.

It is essential that you feel comfortable with your surgeon and are able to have a mutually candid and respectful relationship.

You have the right to seek a second opinion, whether you are seeing a plastic surgeon in the public hospital or private practice. As one patient memorably said to me I feel like I'm commissioning a piece of art on my chest! You must feel that the artist understands what you want!

Here is a list of 6 questions you might wish to ask your surgeon:

1. Are you able to perform all types of breast reconstruction and breast balancing surgeries?
2. What are my options for breast reconstruction? What technique is suggested for me?
3. Do you recommend surgery on the opposite breast for a better match?
4. What would be the time frame for recovery after surgery? What help will I need during this period?
5. What are the potential complications? How will these be managed?
6. How will my new breast(s) change as I get older?

## WHAT DECISIONS DO I NEED TO MAKE?

Breast reconstruction surgery essentially involves creating a breast-shaped mound on the chest using an implant or tissue from your back, abdomen, or possibly buttocks. It may surprise you to hear that there is no such thing as a standard breast reconstruction. The process is highly tailored to your particular wishes and circumstances. As such, it makes sense for you to understand the options and some of the reasons why a particular procedure may be recommended to you. The ultimate decision of course, is always yours.

### IMMEDIATE OR DELAYED?

Ideally you will have a chance to see your plastic surgeon prior to undergoing mastectomy. You may then decide to have the reconstructive surgery at the same time as the mastectomy (Immediate Reconstruction) OR after the breast cancer treatment, including any radiotherapy or chemotherapy, is completed (Delayed Reconstruction).

Which is better? The answer to this question depends on your desires, state of mind and health, as well as the cancer itself. Some women prefer the Immediate Reconstruction option as the treatment is completed in as few stages as possible. The downside is the amount of information that must be taken in and decisions that need to be made, at a time when the devastating diagnosis of breast cancer has just been made. Another important issue to consider is that you may need radiotherapy to the chest area after the mastectomy is completed. This always has a detrimental aesthetic effect on breast reconstruction, particularly if implant-based techniques have been used. Unfortunately sometimes the need for radiotherapy is only discovered after the breast cancer

has been removed and looked at microscopically.

Other women prefer the idea of delayed reconstruction, choosing to concentrate their efforts on fighting the fight against cancer, with the reconstruction being a journey of closure to be undertaken after the cancer is beaten.

## WHAT ABOUT THE OTHER BREAST?

Your breasts don't need to be the same size or shape as prior to cancer and now is the time to be as candid as possible with your plastic surgeon about any thoughts you have in this regard. Usually they make every effort to match the newly reconstructed breast to the other side. However it may be a good idea to consider a breast lift, reduction or augmentation on the other (normal) breast. This usually helps in obtaining better symmetry between the two sides and consequently an ideal aesthetic result.

### ONE STEP AT A TIME

Whatever technique and timing for breast reconstruction is chosen, this will almost always involve several surgical stages. These steps include: creating a new (reconstructed) breast, adding a nipple and areola, and possibly changing the size or shape of the opposite breast. This process may take around 12 months to complete.

## WHAT IS A SKIN SPARING MASTECTOMY?

This is where the general surgeon who performs the mastectomy removes only the nipple / areola and the existing biopsy scar, leaving the rest of the breast skin intact. The actual breast glandular tissue is then removed from under the breast skin. This gives the plastic surgeon more natural breast skin to use in the reconstruction, allowing for a better aesthetic result, as little or no skin needs to be imported from the

back or abdomen. This applies to both immediate and delayed reconstruction.

## **WHAT TYPES OF RECONSTRUCTION ARE THERE?**

You are probably aware that the most common methods of breast reconstruction are with an implant (with or without the Latissimus Dorsi muscle from the back), or with the use of your own natural tissue from the lower abdomen (TRAM flap). The following is a description of what each technique involves and its advantages and disadvantages. Please be aware that breast reconstruction is a constantly evolving field and hence what you may read in an older textbook, article, or even the web may be outdated.

## **EXPANDER / IMPLANT RECONSTRUCTION**

In this method, an empty silicone bag (an expander) is surgically inserted under the skin and is then filled with saline weekly through a valve under the skin. This is done over the period of a few weeks to stretch the skin to the correct size. At a second surgery, the expander is removed and a permanent silicone implant is then inserted.

At times the latissimus dorsi muscle (a large fan-shaped muscle across the back) is also brought across at the first operation to provide extra soft tissue cover for the implant. This may be advised in certain circumstances to provide better cover for the implant.

There are some implants on the market that are designed to be left as a permanent implant once the expansion has achieved the correct size (expander implants). The filling valve is simply removed under local anaesthetic. Although this technique in theory reduces the need for a second operation, more recent studies show that the surgical revision rate for suboptimal results may be disappointingly high.

The advantage of an implant reconstruction is that the recovery is quicker than with a TRAM flap. Scars elsewhere on the body are also minimized. On the downside, implants are mechanical devices and are not designed to last forever. An implant may need revision after some years and is prone to certain problems such as infection and capsular contracture that are unique to this sort of reconstruction. Patients with implant reconstruction generally require a greater number of operations over their lifetime than those who choose to have a TRAM flap reconstruction.

Additionally, if a patient requires radiotherapy the chances of a poor result with implant reconstruction are significantly increased.

## **TRAM FLAP RECONSTRUCTION**

TRAM stands for Transverse Rectus Abdominis Myocutaneous flap. It essentially uses the “spare tissue from the lower abdomen for breast reconstruction” the same tissue that is removed in a cosmetic abdominoplasty (tummy tuck).

The Rectus abdominis muscle is one of the six-pack muscles of the abdomen through which the blood supply reaches the skin and fat of the lower abdomen. In the original version of this operation, this muscle was sacrificed and pedicled (or tunneled) under the skin and up to the chest area to create the new breast mound. Because of concerns regarding residual abdominal weakness following this operation, most plastic surgeons now perform a FREE Muscle sparing TRAM flap. This procedure uses only a small portion of the RA muscle and involves complete detachment and then reattachment in the chest area of the blood vessels supplying this tissue. This involves the use of microsurgery techniques that are now a routine

procedure in many different types of reconstructive surgery.

Better still, and what is currently felt by some surgeons to represent the gold standard in breast reconstruction, is the DIEP flap. The DIEP flap uses the same skin and fat tissue from the lower abdomen as the TRAM flap, but without the rectus abdominis muscle. Studies show that the impact of surgery on abdominal wall strength with this technique is negligible and most women experience little or no change in abdominal function following this procedure.

The advantage of the TRAM / DIEP flap for breast reconstruction is obvious. The lower abdominal tissue looks and feels almost exactly like normal breast tissue. Particularly when an immediate reconstruction is performed following a skin sparing mastectomy, the scars can at times be completely hidden within the new nipple / areola reconstruction. Additionally, the tissue is the woman's own tissue and no implant is needed. There is no leakage or need for replacement. Hence the flap will last a lifetime and will change with the body as it ages or with future weight gain or loss. It is also much more resistant to radiotherapy if this is required after surgery. Overall, TRAM flaps probably require fewer operations than implant reconstructions. Moreover, if a woman has some excess skin and fat in the lower abdominal area, she will more than likely be happy with the flatter abdominal contour that results from having a TRAM / DIEP flap.

The main disadvantage of this technique is the need for a larger operation than an implant reconstruction. This means a longer initial hospital stay of 4-5 days along with a 6 week recovery period after surgery. Another consideration is that



very rarely, some part or all of the flap may be lost if the microsurgery is unsuccessful. The risk of this is much higher if the patient has diabetes, smokes or is obese and in these patients a TRAM flap may be contraindicated.

### SUMMARY

The decision to have breast reconstruction following a mastectomy can be a daunting one. It is essential that you are actively

involved in making the decisions regarding the timing and technique of reconstruction. I strongly believe that in a well-informed and prepared patient, a reconstructed breast can be well-balanced and beautiful. It can significantly improve your quality of life and well-being as well as your perception of looking and feeling complete once more.

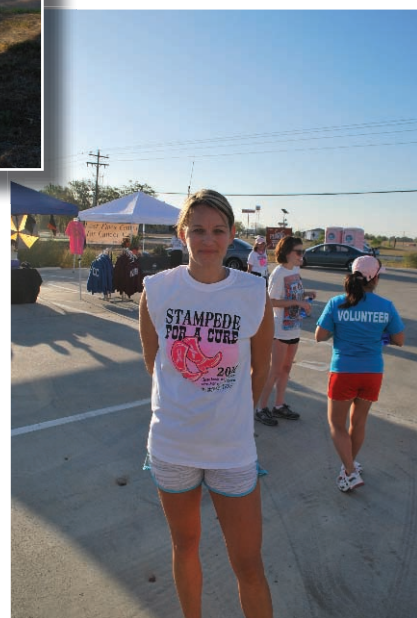
Unfortunately, under the constraints of limited health dollars, not all women who chose to have reconstruction are able to have the surgery in a timely manner. It is essential to continue to lobby for political understanding of the need for having greater resources to be able to provide this service and we are hopeful that this call is slowly being listened to. ■

## SATURDAY, OCTOBER 1, 2011 BOOT STAMPEDE FOR A CURE

*presented by*



**Save the date:  
October 6, 2012**







**Friday, February 24 - Sunday, February 26, 2012,  
Hyatt Regency New Orleans**

*Presented by*



*Lead Sponsor*



*Media Sponsors*



## "You have breast cancer..."

Life-altering words a woman hopes to never hear — especially at a young age. If you were diagnosed under the age of 45, you probably faced feelings of confusion and isolation.

You are not alone.

That is why Living Beyond Breast Cancer and Young Survival Coalition with lead sponsor Susan G. Komen for the Cure® created **C4YW** — an annual conference for young women affected by breast cancer and those who support them.

If you've never been to **C4YW**, please join us.

If you're a returning friend, welcome back.

**C4YW** provides insight and guidance to help young women address the complex psychosocial and medical issues they experience after receiving a breast cancer diagnosis under the age of 45. Now entering its 12th year, the conference continues to deliver one-of-a-kind educational sessions that provide attendees current and relevant information in easy-to-understand language and the opportunity to interact with experts in research, support and care surrounded by other women similarly affected by breast cancer.

**C4YW.org**

Find us on Facebook or Twitter by searching "**C4YW**"



**C4YW**



**“Do you have what it takes to represent  
*Pink Magazine for Ever* at the C4YW,  
conference for young women affected by  
breast cancer, if so here’s how to enter  
the contest.”**

**CONTEST RULES**

**Eligibility:** No purchase necessary, the contest is open to breast cancer survivors age 45 and younger in the following counties Bastrop, Travis, Hays, Caldwell and Williamson.

**How to Enter:** This contest begins at 12:01 a.m. CST on October 1, 2011 and ends 11:59 p.m. CST November 30, 2011. To enter online, go to [www.mypinkmag.com](http://www.mypinkmag.com) and follow the instructions on how to submit your essay of 500 words or less, describing how your life has been impacted by breast cancer as a young women and why you should be chosen to represent *Pink Magazine for Ever* at the 2012 C4YW, Conference for Young Women Affected by Breast Cancer, presented by Young Survival Coalition (YSC) and Living Beyond Breast Cancer (LBBC). Just tell us your story! Feel free to submit pictures, limit one entry per person.

You can also email/mail your stories to P.O. Box 864, Cedar Creek, TX 78612. Email [info@mypinkmag.com](mailto:info@mypinkmag.com). We are not responsible for lost, late, illegible, incomplete entries or entries not received for any reason. Entries become the sole property of *Pink Magazine for Ever*. The winner will be announced Monday, January 9, 2012.

**Judging:** All entries will be judged by *Pink Magazine for Ever* editorial staff based on the following criteria: originality (25%); Creativity (25%); used of language (25%); and appropriateness to contest (25%). In the event of a tie, an additional “tie breaker” judge will determine the winner. There will be one Grand Prize winner.

**PRIZE:**

- Grand Prize winner will be whisked away via air to New Orleans, LA.
- Registration into the conference and all ongoing events for the weekend
- Two Nights hotel stay in New Orleans, LA
- A magazine spread sharing your story and experience about your trip with the world.

**So save the date: Friday, February 24 – Sunday, February 26, 2012  
Get conference details at [c4yw.org](http://c4yw.org)**



# Exclamation

A woman with short grey hair, smiling, stands on a paved walkway in front of the Texas State Capitol building. She is wearing a white long-sleeved blouse with a large floral pattern in red, pink, and green, black trousers, and black flat shoes. The Capitol building, a large stone structure with a prominent dome and arched entrance, is in the background. Lush green trees line the walkway, and several black lampposts are visible. The scene is brightly lit, suggesting a sunny day.

Kay Garcia McAnally



# Point!



*F*

or the first time in my life my self-image is not defined by being too fat, too old, too ethnic, too top heavy or any of the other insecurities that once marred my picture of 'self'. Since my diagnosis of breast cancer I see myself, instead, as one huge exclamation point super-imposed over a written page.

On the page is the summary of my life. My experiences, dreams, disappointments, joys, failures, successes — they are all documented in clear, succinct, script — which is amazing since so much of my time dedicated to 'curing' my cancer was spent lost in the mind-fog of anesthesia, chemotherapy and radiation.

During my treatment, through the haze, I saw the colorful spectrum of life's Human Theatre acted out in front of me. People, issues and their impacts on my life shifted — some for better, some for worse — but relationships, ideals and their influences became clear.

People who I thought were part of my distant past re-entered my life as angels. My ex-sister in law and her partner traveled 900 miles to care for me. Supportive friends gathered round my kitchen table and held my hands

as my sister sheared off resilient patches of my once long, thick hair. Perfect strangers offered their chairs and retrieved food from the top shelves at the grocery store while I sat, unable to stand, in a courtesy cart. My husband, who had never even made his own coffee, cooked and cleaned and rubbed lotion on my swollen feet. My bossy best friend, who was a loving pillar of strength throughout my therapy, chided me because she didn't agree that I was taking proper care of myself.

On the other hand, friends whom I thought I could count on fled. Some co-workers whom I trusted to 'do the right thing' took advantage of my weakness. Finding laughter became more important than breathing. The need for healthcare reform in my country became a burning issue. Drawing energy from a body whose reserves were empty was every day's biggest challenge.

During my treatment, each act of 'Human Theatre' spawned memories of my past. Skipping class in high school, a birthday party in an English garden, the Vietnam War, rocky hippy years with my first husband, the love and support of my second husband, my

mother working long hours to put my dad through college. Dad showing me there were no monsters under the bed — all those events were documented on the page with the exclamation point on top.

During my treatment my mother and sister — both breast cancer survivors — advised me to look for blessings at the worst of times. On many days their goal for me seemed impossible. But after three months of travel down my own road of survival, the winds of recovery have blown away the chemo-fog and have revealed my treasure — my life's story. As I review the written summary in my mind's eye, I am delighted to find that my life, like every other, is indeed, a huge exclamation point! ■

*Hair:* Bonnie Friedman, Top This Salon  
*Make-up:* Grayce Lou  
*Photographer:* Bill Bastas  
*Massage Therapist:* Geri Ruane  
*Clothes provided by:* Dillard's, Domain Austin

# Why The Color Pink?

P

ink has taken over my life these past two years. Previously, with a very “manly” husband and a son, my world was more about Kawasaki green and Yamaha blue (those are motorcycles, ladies!). Then in 2009 my daughter was born and pink began its takeover. I welcomed it, loving the cute pink outfits, baby dolls, curtains. When I felt a lump in my breast in October of last year, at 31 years old, I assumed it was nothing. The possibility of the “other pink” was so unlikely I hardly gave it much thought. Since I was going to the doctor to get a flu shot anyways, I figured I would have it checked out, just in case. A mammogram, biopsy and CT scan later I was reeling from the diagnosis. I’m still reeling a little bit. Stage IV breast cancer that has spread to my liver. February of last year I was breastfeeding my five-month old, and February of this year I’m undergoing chemotherapy for those same breasts.

In these few short months, the color pink has grown to mean so much more to me than girlie dresses and bows. Having no history of breast cancer in my family whatsoever, this diagnosis has thrown me into an amazing pink world of passion, emotion, fear, kindness, and support that I had no idea existed. I have never really been one to halfheartedly attempt anything, so fighting cancer is



and will be no exception. I have two babies that need me, and way too much life left to live! I joined a wonderful support group, the Pink Ribbon Cowgirls, signed up for the Avon Walk for Breast Cancer in Houston, stocked up on wigs and scarves, and have completely accepted this new part of my life as simply “The Next Step.” This isn’t going to slow me down. It’s just going to refocus my attention and energy into something I never dreamed would become such an integral aspect of my life.

My latest scans showed that the chemotherapy drugs are working well, shrinking my tumors by over 40%, and thankfully my side effects have been very minimal. My kids have hardly noticed a change in our daily life, except that we sure do get visitors and meals delivered more frequently! I am

so thankful for the support that I have received from family, friends, and the Austin area breast cancer community, and I hope that I will continue to have the energy and ability to help others with their battle against this disease for many many years to come.

Although I don’t exactly welcome this new infusion of pink like I did with the birth of my daughter, I’m wrapping it around my head, slipping it on my wrist, and fastening it to my shirt, ready to “fight like a girl” alongside so many other strong women. And honestly, I’ve always been a little partial to the color...

Kristie McFarling,  
Future Breast Cancer Survivor

*Photography by Abby Glenn*





# DTG GARMENTS To Go, Inc.

ONE TEAM, ONE GOAL, FOR MORE THAN 20 YEARS



LOGOED APPAREL  
UNIFORMS,  
INCENTIVES  
VALUE ADDED &  
ADVERTISING SPECIALTY ITEMS



[WWW.GARMENTSTOGO.COM](http://WWW.GARMENTSTOGO.COM)



# Pink Links

*Check out some of our favorite links to learn more.*



## **Breast Cancer Organizations: State & National**

American Cancer Society

The National Breast Cancer Coalition (NBCC)

Susan G. Komen for the Cure

Young Survival Coalition (YSC)

Breast Cancer Resource Centers of Texas

Wonders and Worries?

Network of Strength: (Note: Information can be downloaded in English or Spanish.)

Lymphatic Research Foundation

Army of Women

FORCE: Facing Our Risk of Cancer Empowered: For women at risk of hereditary breast and ovarian cancer

MD Anderson

Fertile Hope

CancerCare

Breastcancer.org



## **Complementary and Alternative Medicine, Nutrition and Prevention**

Cancer Research Foundation of America

National Center for Complementary and Alternative Medicine (NCCAM)

The American Institute for Cancer Research

The Breast Cancer Fund



## **Blogs for Patients, Families and Friends**

Care Pages

Caring Bridge

Care Calendar

Lots of Helping Hands

Breast Cancer Lighthouse? (AMA) (personal interviews with breast cancer survivors)

Cancer and Careers (nuts-and-bolts information on subjects like how to protect yourself under the Americans with Disabilities Act or how to schedule chemo around your work schedule)

The American Psychological Association

Cancer Supportive Care





# The Perfect Match

**B**ill and Michelle met in 1983, they married in 1985. "We never spent a night apart," Bill said. "She was my business partner and everything else." They soon decided to close their metal business and focus on Bill's lifelong photography passion. In 1997, they moved their studio to the Westlake area and built a successful business – Bill behind the camera, and Michelle handling almost everything else. They were the perfect team. In 2006, an aggressive and fast moving form of breast cancer claimed her life after 20 years of marriage. Breast cancer took my wife's life and forever changed mine. She was 52, shortly after Michelle passed away I was lost, functioning on reserves, as if by remote control. I wondered, "what good is there in this?"

"I lost everything there was for a man to lose," Bill said. Virtually everything I was, was because of her...but in every good marriage someone has to leave first."

## SAYING GOODBYE

It was around Halloween in 2005 when Michelle developed a limp. By Thanksgiving, she was too uncomfortable to visit her family. By Christmas, she was immobile. A full-body scan revealed fractures in most of her ribs and vertebrae caused by an aggressive bone cancer that doctors said had likely started in the breast area and spread.

Chemotherapy, transfusions and hospital trips filled the weeks that followed.

On Easter Sunday, Michelle was set up in a hospital bed in their living room, and although in excruciating pain, she was surrounded by friends. That night, they all knew the end was close. "I kissed her on her little bald head and told her that it was OK to let go," Bill said around 4 a.m. he heard a roar and saw a bright light in his sleep. "It felt as if she came to say goodbye. I felt her spirit leave the house."

## THE SMILE NEVER FADES

"As I looked through the photos, from the age of 6 months to six months before she died, she always had a smile on her face," Bill said. "That's when it hit me, the smile never fades." He had those words carved on her headstone.

As part of the healing process, Bill decided to use his photography to give back and help in the battle against breast cancer. He began collecting the stories of women with breast cancer and breast cancer survivors, shooting their portraits and compiling them into a book.

Bill named it "The Smile Never Fades," Each new book has been launched in conjunction with a gala fundraiser, held in September at the Long Center. "The reason people are so willing to help is that breast cancer attacks the best of our society: our mothers, sisters, daughters and wives," Bill said. "It motivates me."

## ALWAYS LEARNING

Bill splits his time between paying gigs and shooting photos for "The Smile Never Fades," organizing the gala and running the nonprofit organization by the same name.

It's been challenging and taken him out of his comfort zone, but working with breast cancer patients and survivors brings him peace.

"Life is about change, and it's the only thing you can really count on," Bill said. "You have to stay flexible and live in whatever change has occurred. I'm still learning that." ■



# PINK... the new black

*Ommaney Smith, Pink Magazine For Ever's editor, offers her insight on wearable "pink power".*

**Maybe the color pink used to be off the fashion radar and mostly associated with little girls, Pepto-Bismol or the trendy Paris Hilton set. But pink is making a strong comeback, and in fact the color has come to symbolize strength in the fight against cancer. Now pink is back big time in the world of beauty and fashion. Light or loud, lots or a little, pretty pinks are popping up everywhere!**

## Makeup

Since Fall 2007, fashionistas have been selecting unconventional nail polishes in black, blue and purple, even trying out shades of green, silver and gold. But this season it's back to basic, with a range of pinks ruling the manicure and pedicure pool. Essie's latest collection, *In the Mood*, features a number of soft shades starring the sheer *Hi Maintenance*. On the other side of the spectrum, OPI's *India* collection offers two vivid pinks — *I'm India Mood For Love* and *ElePhantastic Pink*.

But this color wave in beauty goes well beyond the nails. From flesh to fuchsia, pink lips and cheeks are making a major comeback, and celebrities like Rihanna are leading the pack toward this lovely trend. Don't forget about the little pink ribbon that symbolizes Breast Cancer Awareness Month. Both men and women can wear that with just about anything throughout the year.



## Accessories

Believe it or not, blush is the new black. This chic shade is the must-have color in footwear for spring, and it's likely to last well beyond the season. The understated accessory may blend into your skin, but that's all part of the appeal. In a perfect pink blush tone, a shapely shoe and high heel makes the wearer look tall and trim.

And while you're adding to your accessories wardrobe, consider collecting a pretty muted-pink handbag to compliment your new footwear.

But keep in mind that though a range of pinks are popular in makeup and fashion at the moment, your best bet for accessories is a subtle flush or rosy hue. Consider items that are modern classics, that will not only blend seamlessly into your look this season, but have staying power for seasons to come.

## Fashion

No longer limited to strictly girly girls, some of the most sophisticated designers sent pink down the runway for spring. As for me, I wear something “PINK” everyday for awareness and for the cure. My general consensus is, “think pink.”

Gauzy, lightweight fabrics compliment the calm baby pinks seen in flowy, feminine dresses and tops, while bold, eye-popping pinks look particularly perky in new summer swimsuits. But however you choose to wear the hue. Keep in mind, “Pink Ladies” are not only ruling the school this season — they’re ruling the runway, too.

It’s not about a big, poofy pink dress with ruffles that makes you look like a five-year-old that comes to mind; there are different, better and more creative ways to wear pink, especially during Breast Cancer Awareness Month. Accessories are always quick and easy.

One good way to be bold, but subtle at the same time is to wear a solid neutral color, like black, white, brown or tan and mix it up with some pink jewelry, maybe a crystal pink necklace – or a pair of pink chandelier earrings mixed with some pink bangles.

A pink purse, pink sunglasses and/or pink heels will also go a long way if you are wearing a solid neutral color – for instance, a black dress. Wear hints of pink in your clothes. For men in the professional field, pick out a neutral color suit with a pink pinstripe shirt and a pink tie. A professional woman can pretty much do the same thing, but with a skirt suit.

There are also lots of options of prints and designs for both sexes. Ladies, wearing pink makeup is not only flattering, but it counts for the cause! Choose brands that donate to “Cancer Awareness”, are hypo-allergenic or don’t test on animals. Use good judgment here though to avoid looking like a clown. A subtle pink eye shadow or lipstick – or even a rosy, shimmery blush gives you a special glow.

There are also different fun shades of pink nail polish that will make a bold statement and won’t require that much work to keep up with.



## Finding Your Shade

Before you decide to wear pink, it is important to find your shade among the wide variety available. The three main shades that people should follow are light pink, medium pink and hot pink. The question is what is your shade? Usually, people with a fair complexion should wear lighter pinks.

Shades of pink with orange tones in them, like apricot or coral, will normally work for lighter-skinned people as well. For people with medium skin tones, the in-between pinks are usually best.

These shades can have berry, rose or mauve tones mixed in them, which usually compliment the medium skin tones nicely.

As for those with darker skin tones, hot pink or any bold pinks are good – the more red tones, the better. Plum-toned pinks will also work with this skin tone. It may take a while to find your shade, but if you start with the main shades and work your way out, it will get easier.

Versatile, fun, sweet and sophisticated; some think pink could be the new black!





# THE CENTERS FOR CANCER CARE

Helping Cancer **Patients** Become Cancer **Survivors**

We're  
Ready To Help



David Jones, M.D.



Scott Lawson, M.D.



Valerian Chyle, M.D.



Jeffery Chen, M.D.

## We're Bringing World Class Treatment Centers to You.

Your energy is better spent fighting your cancer, not traffic. **There is no reason to drive day after day to San Antonio, Austin or Houston.** We provide World-Class cancer care right here close to home!



Lost Pines Center  
Bastrop, TX



You're welcome to come by and  
visit one of our locations near you.

1-877-629-4208

[www.TheCentersforCancerCare.com](http://www.TheCentersforCancerCare.com)