

Cancer center: ‘They cry with you and they, you know, help you with everything’

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Smith and her husband live in Astoria and raise four children ages 9 to 18 years old.

“My home life was in shambles because I was never home,” Smith said. “It was really hard on my kids. They would just cry and ask me, ‘Why are you leaving again?’”

In previous trips to the center, she would need to drive herself so that her husband could take care of the kids.

“That’s really not cool, but I had no one to take care of the kids for a week,” Mike Smith said. “I’m sure it had to be rough on her to be alone up there.”

Because it is located in a major city, the hospital attracts a high volume of patients. “Experience comes with volume, so I wanted to get her what was the best treatment possible at the time,” Mike Smith said.

But Smith was just one of many people seeking treatment there. On a given day, upward of 100 people could be waiting in the lobby for treatment.

“It’s a wonderful place, but they don’t know who you are,” Smith said. “You might get to know one nurse.”

Tests revealed that the cancer had spread into her liver, lungs, bones, sternum and the lining of her peritoneum. Her calcium levels were also double what they should have been.

“It was just shocking,” Smith said. “We were so surprised.”

Smith returned to Astoria two weeks later, but she still felt sick for a few days. She went to Columbia Memorial, where people asked her if she would be interested in seeking treatment at a new facility that was operating but not officially opened.

Despite hearing about the updated technology at the cancer center, Smith — recalling previous advice from friends and family — was leery.

‘They cry with you’

One day, Dr. Jennifer Lycette, the medical director of oncological services at the new cancer center, walked into Smith’s room.

After reading a pathology report, Lycette told Smith that a receptor in her body was making the cancer grow at a more rapid rate. She prescribed several drugs to specifically target the receptor.

The Smiths recognized Lycette’s involvement as a turning point in Kari’s treatment.

“She is so knowledgeable



Photos by Colin Murphey/The Daily Astorian
Kari Smith shows where at the cancer center in Astoria patients can be fitted for wigs and receive other supportive services.



Kari Smith stands in one of the main treatment areas of the cancer center in Astoria which features a view of the Columbia River and the Astoria Riverwalk.

that she doesn’t even need to be here,” Mike Smith said. “Those people who stay in a small community like ours are a huge blessing.”

Within a month, Smith was feeling healthy again.

“It’s not perfect, but they’re always on top of it,” she said.

Her life the past few months, despite the occasional small relapse, has been as stable as it has been since her diagnosis, she said. She now works one day a week at Bridgeport Oral Surgery in Warrenton as a surgical assistant.

When she enters a treatment phase, Smith will visit the cancer center for a few hours once every week or two. If necessary, she can also go to the center for minor procedures.

While there, she makes use of features such as a chemotherapy infusion room, which includes lounge chairs that face the Columbia River. She has also enjoyed peering at X-rays on a large television screen —

instead of a computer screen — as well as a resource center that includes a wide range of customizable wigs.

Smith’s face beams when she speaks about her interactions with staff. The facility’s small size has allowed her to develop relationships with nearly everyone who works in the building.

“They cry with you and they, you know, help you with everything,” Smith said. “It’s just different. I’d never been anywhere like that before.”

Smith usually goes to treatment while her children are at school, a drastic change from the time commitments that her therapy once required.

“Now they don’t even realize I’m getting treatment because they’re oblivious, I guess,” Smith said about her children with a laugh. “It’s kind of nice that we’ve resumed a normal type of life now.”

She still advises patients in a similar situation to seek second opinions, as she did. But she also points to the cancer center’s proximity to the coast and support — especially for women diagnosed before turning 40 years old — as reasons to consider the new facility as a viable treatment option.

After years of skepticism and struggle, Smith has squashed her fears of seeking treatment close to home. The horror stories she had always heard about small-town cancer treatment linger, but are no longer a blockade.

“We didn’t have treatment like this then,” Smith said. “I wouldn’t hesitate to recommend it to them or encourage them to come here.”

Crab season: ‘So we’re still doing crab, just not from our own area’

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“Whatever’s better for the commodity is best — which is letting the crab sit and grow,” said Crystal Adams, of Hallmark Fisheries in Charleston and a processor representative on the Oregon Dungeness Crab Commission.

“It’s hard for the families that work here and the fishermen that fish on the crab because they rely on that for the holiday season,” she said. “But to continue to have this for years to come, it’s whatever’s good for industry.”

The company is processing crab from California later this week. After several years of bad luck and curtailed seasons, the Dungeness season opened in California south of the Sonoma-Mendocino county line as scheduled on Wednesday.

“So we’re still doing crab, just not from our own area,” Adams said.

Last season, commercial crabbers landed more than 20.4 million pounds of crab into Oregon for an average price of \$3.08 per pound. The opener for that season was also delayed, but saw the highest ex-vessel value at \$62.7 million, according to the Oregon Dungeness Crab Commission.

Crab quality testing for this season began in November, with Washington state opting to do early testing in October. Washington, Oregon and California manage the Dungeness fisheries together under a tri-state agreement. Of the three, Washington was the only one to conduct optional early tests.

While Washington fishery managers reported a meat rate recovery of 20 percent off the Long Beach Peninsula, elsewhere some per-

PAST SEASON

Commercial crabbers landed more than **20.4 million pounds of crab** into Oregon for an average price of **\$3.08 per pound**. The past season’s opener was also delayed.

centages were lower. Off the Oregon Coast, meat recovery percents were mostly under 23 percent, with 18 percent in Astoria and Brookings. Coos Bay came in with a 24 percent meat recovery.

All areas have to be at or above 23 percent before the season can open.

For Oregon fishermen, the delay was not a surprise given the test results, but now there’s not much for many to do except wait for the results of the next round of tests and Dec. 16 to arrive.

“There’s lots to do on the boats, but right now we’re done,” said Brian Boudreau, a commercial crabber based in Clatsop County. “We’re pretty much done and ready to go.”

Unsafe levels of the marine toxin domoic acid have shut down recreational and commercial harvest of crab in bays and estuaries, beaches, docks, piers and jetties from Cape Foulweather to Tahkenitch Creek, and from Coos Bay’s north jetty to the California border.

Commercial harvest of Dungeness in Oregon’s bays that are still open will close on Dec. 1, but will reopen with the ocean commercial fishery. Recreational harvest of the crabs in the ocean will open Dec. 1 as scheduled where there are no health advisories from the Oregon Department of Agriculture, according to the Oregon Department of Fish and Wildlife.

Forum: Student goals are another metric of success

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students. Nationally, about 70 percent of recent high school graduates require at least one remedial course, he said, and only 7 percent of those students who keep attending and take remedial courses end up reaching college-level courses.

Breitmeyer said putting students in remedial courses is like telling them they’re not smart enough or going to finish. “It’s almost a self-fulfilling prophecy.”

Community colleges are starting to do away with developmental courses, instead placing students into college-level courses, providing extra support, allowing them to sink or swim and letting them know it’s OK to fail and try again, he said.

The same strategy was tried at St. Charles by placing development English students into college-level courses, with strong results, he said. He called for a similar growth-oriented mindset locally.

“They’ve also got to figure out what’s important to them,” Breitmeyer said.

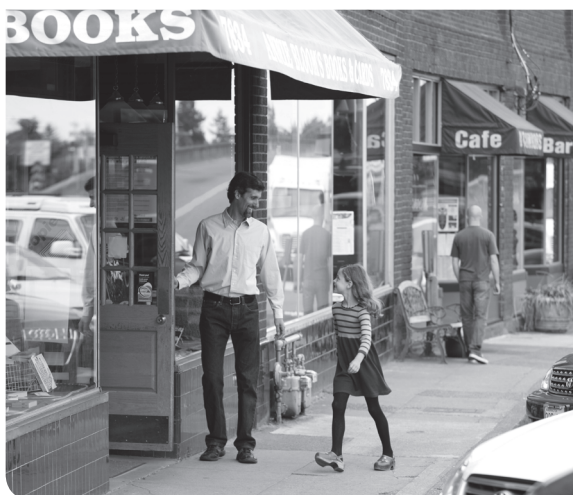
Goals are another metric of success, he said, and colleges need to do a better job of steering students into certain pathways so they have goals.

“That doesn’t mean you can’t break out of that pathway, but once you’ve got a goal, you’re two to three times more likely to continue and to

persist and to make it,” he said.

Breitmeyer said there is a movement in the state and U.S. toward such guided pathways.

“When you come into any community college five years from now, you’re going to pick one of maybe five majors, and that’s it,” he said. “That’s going to be a very proscribed course for you to take.”



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