

From the Moment I Heard 'Cancer'

Reflections on dealing with cancer during my legal career

By Correale F. Stevens



It began with a
backache: a dull,
throbbing pain in
the lower back.
Not enough to
double me over,

but a persistent reminder it
was there. It was February
1982, and I had just been
sworn in to my second term
in the Pennsylvania House
of Representatives. I had
regularly been making
the three-hour roundtrip
commute from Harrisburg
to my home in Hazleton.
A simple backache caused
by hours of driving. At least
that's what I thought.

One night I awoke shaking and soaking wet. The perspiration was so intense that my side of the bed was dripping wet. "A virus," I told myself, and did nothing about it. The next month, the night sweats happened again. This time, fearing a heart attack and acting as "Dr. Stevens" with no medical training, I took an aspirin, changed the sheets and went back to sleep. The following morning I finally sought medical attention, but I didn't think to mention the night sweats. After a series of tests and no irregular results, I settled back into my normal everyday routine. Except the dull ache was still in my back.

During the summer of 1982, I began to feel healthier, less tired and, with the help of newly prescribed anti-inflammatory naproxen tablets, I even tried playing golf. All seemed well — except for my golf scores.

As summer turned into fall, the back pain returned and the naproxen did not help

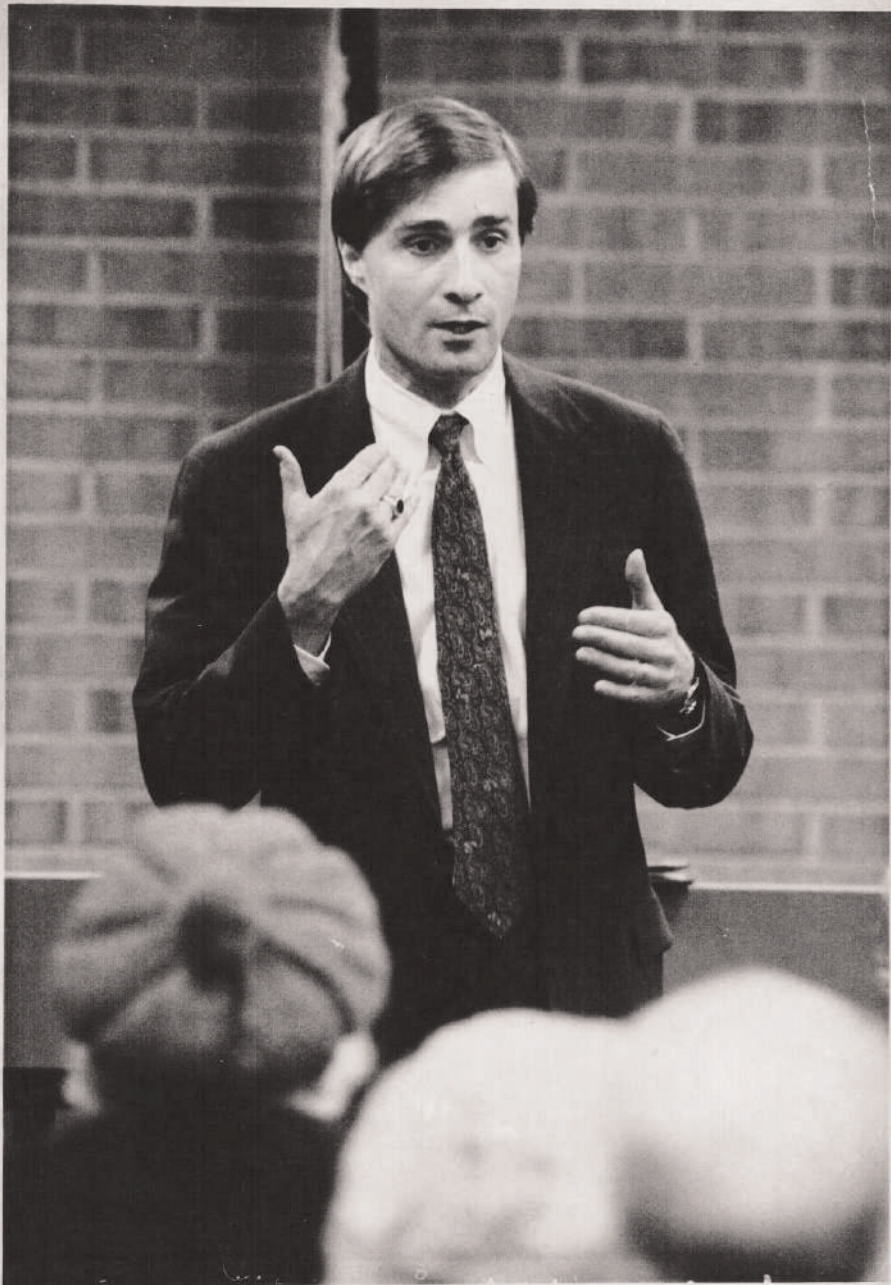
this time. Tests to look for urinary tract infections came back normal.

In December, I became fatigued while Christmas shopping and was treated for pneumonia. I stayed in bed throughout the holiday and took antibiotics under the watchful eye of my family physician and college friend, Dr. Michael Washinsky.

Several weeks later, almost a year to the day that I first felt back pain, a snowstorm pounded our town. Snow shoveling caused me to double up in pain, and now it was time to see an orthopedic doctor.

I was admitted to the local hospital and scheduled for physical therapy. Following a CAT scan, I was told the physical therapy was cancelled. Instead I was now to undergo a bone scan. When the doctor entered the hospital room, I blurted out, "Am I in a life-threatening situation?" The answer was yes, and it appears to be Hodgkin Disease, a cancer of the lymph





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system. But, he continued, the recovery chances for Hodgkin lymphoma were much higher than for non-Hodgkin. "You don't want to have non-Hodgkin," he assured me. Nevertheless, I was advised to "get my affairs in order."

The thought of cancer sent a shiver down my spine. My mother died of a brutal, painful brain tumor at age 52. A life-long Lucky Strikes smoker, she developed lung cancer that spread throughout her body.

Unknown to me, rumors of my health were spreading around my hometown, most of which were misinformed. I was

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a high-profile state representative with strong local ties, and speculation reigned about my condition. One story was that I had been taken to a Philadelphia hospital by emergency helicopter. Another was that I had only days to live. Names of potential candidates to replace me in the House were beginning to circulate. And, as I learned much later, one woman made a hundred-dollar bet with my legislative aide that I would be dead in six months. I made sure he collected the day after the sixth month passed.

As I checked into Geisinger Medical Center in Danville for treatment, I was determined to do whatever I had to do to maintain my normal lifestyle and stay positive. It was only when my then-3-year-old son, now attorney Brody Stevens of Ardmore, visited and asked if I would be home in time to watch "The Dukes of Hazzard" with him that a moment of terror gripped me. As soon as he left, the tears flowed for the first time since I learned I had cancer.

From the moment I met Dr. Neil Ellison, my oncologist, I had complete confidence in him. He immediately sent my lab tests out for a second opinion as his review of my case raised questions about the initial diagnosis of Hodgkin disease. The report came back as he had suspected. I had non-Hodgkin lymphoma. Stage 4. About a 60 percent chance of recovery. The cancer I was told "not to have."



Stevens and his children, circa 1993

After an initial operation to remove a lymph node, I was still under the effects of anesthesia when a young lady from my legislative district somehow found my hospital room and asked me to be a reference for her for a job. Constituent work while under anesthesia! She left quickly when she realized I was recovering from an operation and not capable of carrying on a conversation.

Dr. Ellison assured me he was going to treat the cancer aggressively — go for the cure. He arranged for me to visit a specialist at Boston Children's Hospital, a doctor who had just created a protocol specifically for non-Hodgkin, called m-BACOD: 30 weeks of chemotherapy, with the biggest dose of drugs every third week.

Facing a life-threatening illness, I asked Dr. Ellison what he said every cancer patient asks: Will I lose my hair? His answer? Yes, but you can purchase a wig. Even my eyebrows partially disappeared. It was not only the hair loss that was unset-

tlung; the chemo drugs caused me to look bloated. And the problem with the wig was that each night when I removed it, the tape that kept it in place would tear out some of the remaining hair.

The chemotherapy room was large, with comfortable, reclining chairs. Curtains around each chair gave the patient privacy. The drugs were administered intravenously by kind, caring, specially trained nurses. As I received my chemotherapy every Friday, I was so determined to keep things normal that I insisted on driving myself the 90 miles roundtrip to the hospital. I continued to perform my legislative duties, attending sessions, taking care of constituent work, even giving public speeches. And, of course, there was family time.

After the Friday chemo I was fatigued, used the weekend to recover and then drove to Harrisburg on Monday session days. I was determined to not let the disease take control of my life. In April 1983, I was in the delivery room when my sec-

ond son, Ryan, now an attorney in Flagstaff, Ariz., was born, and I was a proud dad in spite of being ill.

My motivation was my family, especially having a 3-year-old son and a newborn son at the time of treatment. I was motivated to follow the treatment protocol and my doctor's instructions as a means to getting better. Friends, family and colleagues who knew about my condition were tremendously supportive. And I knew I had responsibilities as an elected official that needed attention.

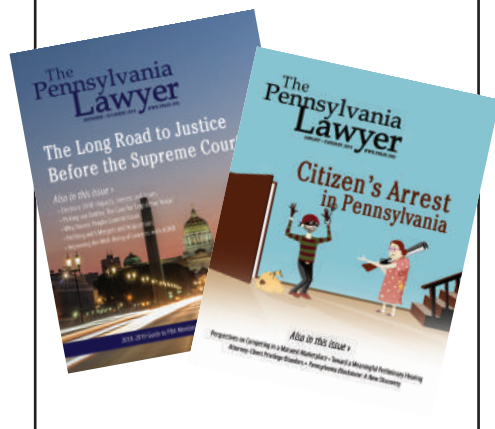
In my role as state representative, I sponsored an annual luncheon for senior citizens, attended by various state agency officers and statewide office holders — even former Philadelphia mayor Frank Rizzo had attended as a speaker — for a few hours of good food, old-time sing-alongs and information booths staffed by the state officials. The relationship I had developed with those senior citizens became a major source of inspiration to me. Cards, letters and telephone calls came in by the hundreds. I still had not publicly acknowledged my illness, but my physical appearance told the story.

Normally, I always did and still do return calls from news media reporters, understanding that they are just doing their job when they contact me. However, one evening I slammed my home door on a

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reporter who interrupted my family's dinnertime, asking, in front of my two young sons, "Is it true you have a terminal illness?"

I didn't want sympathy and I especially didn't want people to treat me as though my illness was terminal. So I refused to discuss my illness with anyone other than family and a few close friends.

The day finally came when my treatment was over. With great trepidation, I met with Dr. Ellison but I knew immediately from his smile that things were looking good. Thanks to faith in God, friendships and family and outstanding medical treatment, the cancer was not in remission, it was gone. Dr. Ellison explained that cancer of the lymph system follows the lymph nodes throughout the body. Fortunately, the chemo followed the same path. And

fortunately, the chemo protocol, as new as it was, was effective.

Health-wise, the next few years were uneventful. The year 1990 was significant with the birth of my daughter Brittany, now Brittany Stevens Mercadante, a pre-K teacher.

I was reelected to the House for a total of four terms, elected Luzerne County district attorney, then trial judge and, in 1997, won a statewide election to the Superior Court.

After a couple of years, my quarterly check-ups were changed to just yearly. Dr. Ellison and I became personal friends. In 2000, when I took a call from him while I was driving to a court session, I knew from his voice that something was wrong.

Non-Hodgkin again. Not a reoccurrence, a new one. This time we caught it in stage 1. Again I scheduled chemo, this time with radiation, on Fridays so as not to affect my work schedule.

When Brittany was young, she loved “Rugrats” cartoons. One of their sayings was, “A baby’s gotta do what a baby’s gotta do.” That became my mantra. With every MRI, PET scan, CAT scan and medical procedure, I said to myself, “A baby’s gotta do what a baby’s gotta do,” especially when I had to wear a catchers-type mask and be put in a CAT scan “doughnut” with my face a mere few inches from the top of the machine for 45 minutes at a time.

I continued to do treadmill running, weight and exercise workouts during my new treatment. Fighting through fatigue, one day I drove from Hazleton to Danville for radiation, seven more hours to Boston College to pick up Brody for his spring break and then home to Luzerne County. Never did I miss a cross-country race, basketball game or any scholastic event involving my children.

Fortunately, once again, with great faith and sound medical decisions, at the end of another round of 30 treatments, the cancer was gone.

From the moment I heard “cancer” in 1983, my view of life changed dramatically. For example, mundane chores such as taking out the garbage or walking the dog became things I looked forward to being able to do once again. I realize from personal experience the importance of kind and considerate health care staff and I have a better understanding of the relationship between cancer patients and their nurses. I look at each day as a blessing. I take nothing for granted. There is no question that faith and a positive attitude complement medical treatment.

I enjoy my work, my colleagues on the Superior Court and my family. I do not view myself as a cancer victim or a cancer

survivor; I am simply a former cancer patient.

Just as my doctor understood the importance of my treatment to me, I understand the importance of my decision-making as a public official. Consequently, I believe in being prepared, fair and timely in performing my duties. I embrace the daily challenges of my elected position and I keep a balanced approach to my life. The challenges of the illness and treatment process reminded me that I am a strong person and can serve a varied public.

I remain available to speak with people who are dealing with cancer as I hope I can offer them a bit of inspiration. I try to make sure they know that I am truly listening to them, to their hopes, their fears and their thoughts. When asked for suggestions, I advise patients to always have someone with them at meetings with their doctors because it is normal to be nervous, which increases the chance of misunderstanding or forgetting what the doctor says. I point out that there will be mood swings, and to anticipate that there will be days of fatigue and sometimes fear.

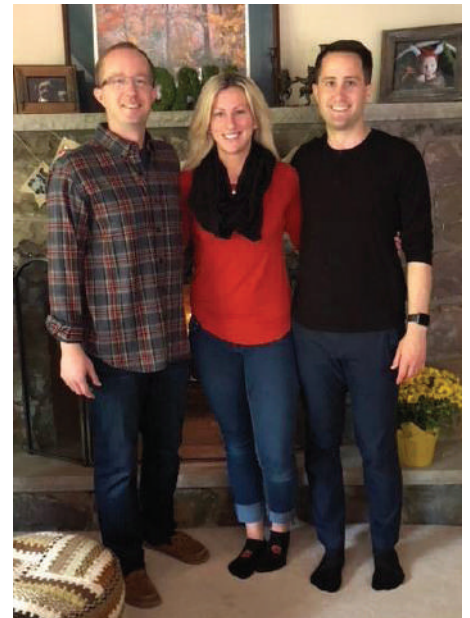
Most of all, I do my best to encourage them to have confidence in their treatment and faith that they will recover. I trusted my doctors completely and followed the treatments as prescribed. The only thing I would do differently — and there is no way to do it — would be to remove all worry from family and friends about me during the days of the cancer. ☞

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