

# Making Strides Against Cancer



"WHY ME?" THE ANTIGUA & BARBUDA CANCER SOCIETY

Volume 7, Issue 7

## July is Skin Cancer Awareness Month

### SKIN CANCER FACTS



#### **Skin Cancer Facts:**

Most of the more than 1 million cases of non-melanoma skin cancer diagnosed yearly are considered to be sun related. Melanoma, the most serious type of skin cancer, will account for about 59,940 cases of skin cancer in 2009 and about 10,850 deaths due to skin cancer.

#### **Frequently Asked Questions:**

**What is skin cancer?** The skin is the largest organ of the body. It covers the internal organs and protects them from injury; serves as a barrier between germs, such as bacteria, and internal organs; and prevents the loss of too much water and other fluids. The skin regulates body temperature and helps the body get rid of excess water and salts. Certain cells in the skin communicate with the brain and allow for temperature, touch, and pain sensations.

**What is non-melanoma (basal or squamous cell) skin cancer?** Most skin cancers are classified as non-melanoma, usually occurring in either basal or squamous cells. These cells are located at the base of the outer layer of the skin or cover the internal and external surfaces of the body. Most non-melanoma skin cancers develop on sun exposed areas of the body, like the face, ear, neck, lips and the backs of the hands. Depending on the type, they can be fast or slow growing, but they rarely spread to other parts of the body.

**Melanoma is almost always curable when it is detected in its early stages.** Although melanoma accounts for only a small percentage of skin cancer, it is far more dangerous than other skin cancers and causes most skin cancer deaths.

**How many people are affected by skin cancer?** Skin cancer is the most common of all cancers. It accounts for nearly half of all cancers in the United States. More than a million cases of non-melanoma cancer are found worldwide each year.

**Who survives skin cancer?** For basal cell or squamous

cell cancers, a cure is highly likely if detected and treated early. Melanoma, even though it can spread to other body parts quickly, is also highly curable if detected early and treated properly. The 5-year survival rate is 99%; survival rates for regional and distant stage disease are lower.

**How many people will die of skin cancer?** The American Cancer Society estimates there will be around 15,000 + for the year of 2008.

**What are the risk factors for skin cancer?** Risk factors for non-melanoma and melanoma skin cancers include:

- Unprotected and/or excessive exposure to ultraviolet (UV) radiation
- Fair complexion
- Occupational exposures to coal tar, pitch, creosote, arsenic compounds, or radium
- Family history
- Multiple or atypical moles
- Severe sunburns as a child

**What are the signs and symptoms of skin cancer?** Skin cancer can be found early.

See page two.

#### **What is skin cancer?**

SKIN CANCERS ARE DIVIDED INTO 2 MAIN TYPES: KERATINOCYTE CANCERS (BASAL AND SQUAMOUS CELL SKIN CANCERS) AND MELANOMAS.

BASAL AND SQUAMOUS CELL SKIN CANCERS ARE THE MOST COMMON CANCERS OF THE SKIN. THEY DEVELOP FROM CELLS CALLED KERATINOCYTES, THE MOST COMMON CELLS IN THE SKIN.

MELANOMAS ARE CANCERS THAT DEVELOP FROM MELANOCYTES, THE CELLS THAT MAKE THE BROWN PIGMENT THAT GIVES SKIN ITS COLOR. MELANOCYTES CAN ALSO FORM BENIGN GROWTHS CALLED MOLES.

THERE ARE SEVERAL OTHER TYPES OF SKIN CANCERS AS WELL, BUT THESE ARE MUCH LESS COMMON.

IT IS IMPORTANT FOR DOCTORS TO TELL THESE TYPES OF SKIN CANCER APART, BECAUSE THEY ARE TREATED DIFFERENTLY. IT IS ALSO IMPORTANT FOR YOU TO KNOW WHAT MELANOMAS AND BASAL AND SQUAMOUS CELL SKIN CANCERS LOOK LIKE. THAT WAY, YOU CAN FIND THEM AT THE EARLIEST POSSIBLE STAGE, WHEN THEY ARE CURED MOST EASILY.

# Making Strides Against Cancer

## Skin Cancer Continued

And both the doctor and the patients play important roles in finding skin cancer. If you have any of the following symptoms, tell your doctor.

- Any change on the skin, especially in the size or color of a mole or other darkly pigmented growth or spot, or new growth.
- Scaliness, oozing, bleeding, or change in the appearance of a bump or nodule
- The spread of pigmentation beyond its border such as dark coloring that spreads past the edge of a mole or mark
- A change in sensation, itchiness, tenderness, or pain.

### Can skin cancer be prevented?

The best ways to lower the risk of non-melanoma skin cancer are to avoid intense sunlight for long periods of time and to practice sun safety. You can continue to exercise and enjoy the outdoors while practicing sun safety at the time. Here are some ways you can do this:

1. Avoid the sun between 10:00 am and 4:00 pm
2. Seek shade; look for shade, especially in the middle of the day when the sun's rays are strongest. Practice the shadow rule and teach it to your children. If your shadow is shorter than you, the sun's rays are at their strongest.
3. Slip on a shirt; cover up

with protective clothing to guard as much skin as possible when you are out in the sun. Choose comfortable clothes made of tightly woven fabrics that you cannot see through when held up to a light.

4. Slap on sunscreen. Use sunscreen and lip balm with a sun protection factor (SPF) of 15 or higher. Apply a generous amount and reapply after swimming, towel-drying, or perspiring. Use sunscreen even on a hazy or overcast day.
5. Slap on a hat. Cover your head with a wide brimmed hat, shading your face, ears, and neck.
6. Wrap on sunglasses. Wear sunglasses with 99% to 100% UV absorption to provide optimal protection for your eyes and the surrounding skin.
7. Follow these practices to protect your skin even on cloudy or overcast days. UV rays travel through clouds.
8. Avoid other sources of UV light. Tanning beds and sun lamps are dangerous because they can damage your skin.

### What is Why Me Doing about Skin Cancer?

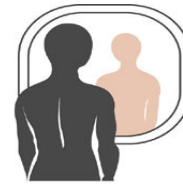
- **Education.** Why Me delivers health information to the public, so that individuals can make informed personal decisions. For information regarding skin cancer, and or support contact us today.
- **Advocacy:** With the help of grassroots volunteers in the community and across the country, we are working constantly to ensure responsible health policies are enacted and increase funding for research and testing and treatment coverage.
- **Service.** Why Me? Works to improve quality of life for people living with cancer through a variety of support services and programs helping patients and families cope with the disease.

We collaborate with other nationwide and international organizations to promote skin cancer prevention, education, and sun safe policies.

### Examining Your Skin

As part of a routine cancer-related check-up, your doctor should check your skin carefully. He or she should be willing to discuss any concerns you might have about this exam.

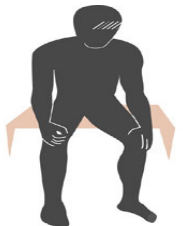
It is important to check your own skin, preferably once a month. A self exam is best done in a well lit room in front of a full length mirror.



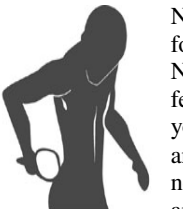
Face the mirror: Check your face, ears, neck, chest and belly. Women will need to lift breasts to check the skin underneath.



Check under both sides of the arms, the tops and bottoms of your hands, in between your fingers and fingernail beds.



Sit Down: Check the front of your thighs, shins, tops of your feet, in between your toes, and toenail beds.



Now you will need a hand mirror for your thighs, back, and scalp. Now look at the bottoms of your feet, your calves, and the backs of your thighs, first checking one leg and then the other. The back of the next, your genital area, lower back and upper back. It may be easier to look at your back in the wall mirror using a hand mirror. Use a comb or hair dryer to part your hair so that you can check your scalp.

**What should I look for?** Basal cells cancers and squamous cell cancers are most often found in areas that get exposed to a lot of sun, such as the head, neck and arms but they can occur elsewhere. Look for new growths, spots, bumps, patches or sores that don't heal after 2 or 3 months.

## Ginkgo biloba: Can it prevent memory loss?

**Question:** Ginkgo biloba, can it prevent memory loss? Can ginkgo biloba prevent memory loss and improve cognitive function in people with Alzheimer's disease?

**Answer:** Ginkgo biloba, derived from the leaves of the Ginkgo biloba tree, is often touted as a memory aid, but it's still unclear whether ginkgo biloba can prevent memory loss associated with mild cognitive impairment or Alzheimer's disease.

Small, early studies have

shown modest improvements in cognitive function for older adults with dementia. However, a large scale study, published in November 2008 issue of the Journal of the American Medical Association, found no evidence that ginkgo biloba prevents memory loss or slows the progression of dementia among those who had mild cognitive impairment at the start of the study.

More studies are needed to determine possible benefits and long term risks of ginkgo

biloba. For now, ginkgo biloba is generally recognized as safe if taken as directed and under the guidance of your doctor. However, bleeding may be a concern when ginkgo biloba is taken with other medications because it may affect the clotting process. Don't use ginkgo biloba if you're taking anti-clotting medications, aspirin, or medications that can affect bleeding, such as ibuprofen. Consult your doctor before starting any dietary supplement.

Awareness Color  
Black



Sun Safety Matters.  
Sun Safety Matters.

July:  
Skin Cancer  
Awareness

## What's Your Sun Safety IQ?

Sun safety is not just for vacation. Are you sun safe every day? Take the ACS's 9 question quiz and find out.

1. **I can't get skin cancer, because my routine (work, drive to work, indoor hobbies, and vacations) doesn't include any outdoor activities.**

- True
- False

2. **My husband should use sunscreen at football games, even though he only goes (and gets a burn) once or twice a year.**

- True
- False

3. **If I'm wearing sunscreen, I can stay in the sun as long as I want.**

- True
- False

4. **A sunscreen labeled SPF 30**

**blocks twice as much UV radiation as one labeled SPF 15.**

- True
- False

5. **It's safe to let my children stay in the pool/beach all day if they slip on a t-shirt or towel after a couple of hours and reapply sunscreen to their faces, arms, and legs.**

- True
- False

6. **How often do you need to reapply water-resistant sunscreen?**

- Every 2 hours or sooner
- After sweating or swimming
- After you towel dry
- All of the above

7. **Getting a "base tan" at an indoor tanning salon is a good way to prevent sunburn when I go to the beach later this summer.**

- True
- False

8. **What are the two most common (and painful) sunscreen mistakes?**

- Choosing an SPF below 15 and missing spots
- Using too little and waiting too long to reapply

9. **Now put it all together. You applied sunscreen at 12:00 noon for an afternoon of reading beside the pool. At 2:00 pm, which one of the following actions would best protect your skin?**

- Slip on a long cotton dress
- Move to the shade
- Reapply sunscreen.

Answers on page 4.



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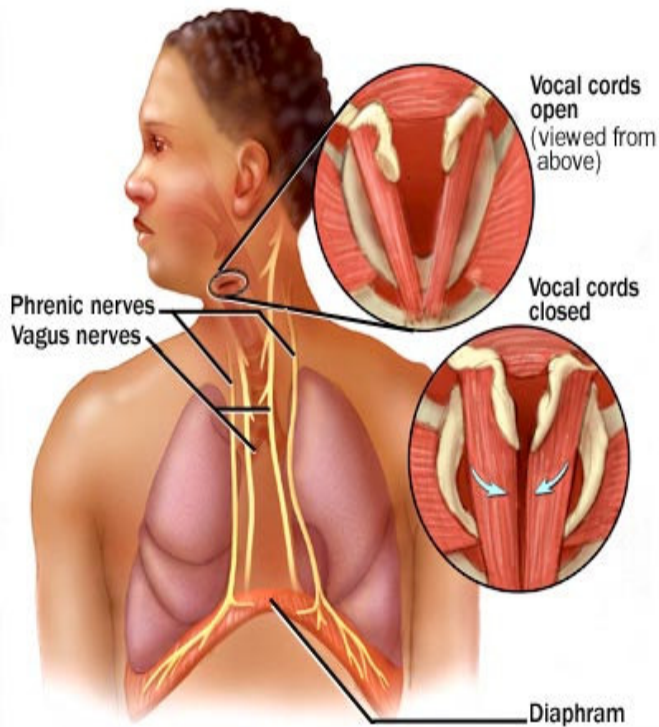
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## Sun Safety Quiz Answers

- The correct answer is false.** Dermatologists say brief sun exposures all year round can add up to major damage for people with fair skin. And the sun's ultraviolet (UV) rays do pass through car windows, so driving during peak sun hours, 10:00 am to 4:00 pm, to lunch or on weekends, bathes your hands and arms in damaging UV rays. When added up, everyday exposures are linked to squamous cell cancer. Although not as dangerous as melanoma, squamous cell cancer is far more common and the number of cases has been going up every year.
- The correct answer is true.** Many people think it's O.K. to get a sunburn now and then, but studies show that even occasional exposure to strong sunlight seems to increase the risk of the most serious type of skin cancer, melanoma.
- The correct answer is false.** It's not smart to broil in the sun for several hours, even if you are wearing sunscreen. These products don't provide total protection from ultraviolet (UV) rays. The ACS recommends that people seek shade and limit time in the sun at midday. Also, cover up with a shirt, wear a wide brimmed hat, use a sunscreen rated SPF15 or higher, and reapply it about every 2 hours. And don't forget sunglasses for eye protection.
- The correct answer is false.** The Sun Protection Factor (SPF) describes how long a product will protect your skin, if you apply the sunscreen correctly. Fair skinned people begin to burn in about 15 minutes on a sunny day, so wearing an SPF 15 sunscreen (if applied and reapplied properly) would prevent sunburn for about 225 minutes ( $15 \times 15$  minutes until sun burn = 225), or 3 hours and 45 minutes. The SPF 30 sunscreen should last for 450 minutes ( $30 \times 15 = 450$ ), or 7 hours and 30 minutes. In practical use, you'll need to reapply sunscreen every 2 hours. Be sure to choose a broad spectrum product that blocks UVB and UVA light and *use a lot*.
- The correct answer is false.** UV rays easily go through a white cotton T-shirt, especially if it's wet. Your children will get only about as much protection as an SPF 4 sunscreen—certainly not enough for all day and well below the minimum of SPF 15 recommended. Better clothing choices include dark colors, fabrics with tight weaves, specially treated garments and bathing suits. Sun protective clothing is often found at sporting goods stores. Another good choice is moving into the shade. For babies younger than 6 months, shade, sun-protective clothing, and hats are best. As a last resort, pediatricians now say that very small amounts of sunscreen can be used on small areas, such as the face and back of the hands.
- The correct answer is all of the above.** For best results, most sunscreens need to be reapplied about every two hours or sooner, but be sure to check the label. Sunscreens labeled "water resistant" are made to protect you when swimming or sweating, but may only last for 40 minutes. Also, remember that sunscreen usually rubs off when you towel dry.
- The correct answer is false.** Experts say a "base tan" gives you very little protection against sunburn. And that goes for indoor tans, too, which provide a sun protective factor of about 4, much less than most sunscreens. A base tan may, if fact, increase the chance you'll get burn, because you're likely to stay out longer without properly protecting your skin. Also tanning itself injures the skin. What you don't see is UV damage to deeper layers, where it builds up from every tan and burn you've ever had. There really is no such thing as a "safe tan."
- The correct answer is using too little and waiting too long to re-apply.** About 1 ounce of sunscreen (a 'palmful') should be used to cover the arms, legs, neck and face of the average adult. For best results, most sunscreens must be reapplied at least every 2 hours and even more often if you are swimming or sweating. Products labeled 'waterproof' may provide protection for at least 80 minutes even when you are swimming or sweating. Products that are "water resistant" may provide protection for only 40 minutes. To be safe use a lot of sunscreen and use it often.
- The correct answer is move to the shade.** While all three actions help, getting out of the mid-day sun is the best choice in this situation. Seeking shade is a key element in preventing skin cancer, especially between 10:00 am and 4:00 pm. The sundress blocks very little UV radiation because it's made of cotton. It compares to a sunscreen rated SPF 4. Covering up is the right idea, but dark colors, tight weaves, and clothing labeled at least UPF30 work better. Sunscreen should not be used to extend your time in intense sunlight. It's an important part of a larger strategy that is recommended by experts to do to protect your skin, but it does not provide total protection. To get the most from sunscreen, choose products of SPF 15 or higher that blocks both UVA and UVB rays, reapply at least every 2 hours and use at least 1 ounce or a palmful for an adult.

**So what did you score?**

## HICCUPS: WHAT CAUSES THEM?



**Causes:** The most triggers for short-term hiccups include:

- Eating too much
- Drinking carbonated beverages
- Excessive consumption of alcohol
- Sudden temperature changes
- Excitement or emotional stress.

Hiccups that last more than 48 hours may cause a variety of factors, which are generally grouped into the following categories:

**Nerve damage or irritation.** The most common cause of long term hiccups is damage or irritation of the vagus nerves or phrenic nerves, which sever the diaphragm muscle. Factors that may cause damage or irritation to these nerves include:

- A hair or something else in your ear touching your eardrum
- Sore throat or laryngitis
- A tumor, cyst or goiter in your neck
- Gastroesophageal reflux

**Central nervous system disorders.** A tumor or infection in your central nervous system or damage to your central nervous system as a result of trauma can disrupt your body's normal control of the hiccup reflex. Examples include:

- Stroke
- Multiple sclerosis
- Tumors
- Meningitis
- Encephalitis
- Traumatic brain injury

**Metabolic disorders and drugs.**

- Alcoholism
- Anesthesia
- Barbiturates
- Diabetes
- Electrolyte imbalance
- Kidney failure
- Steroids
- Tranquilizers

Continue on page 6

**Hiccups are a common condition that affects nearly everyone.** Hiccups involve the involuntary contractions of the diaphragm—the muscles that separates your chest from your abdomen and plays an important role in breathing. Each contraction is followed by a sudden closure of your vocal cords, which produces the characteristic “hic” sound.

Many people have home remedies for hiccups that they swear by, ranging from breathing into a paper bag to swallowing a teaspoon of granulated sugar.

Hiccups may result from a large meal, alcoholic beverages or sudden excitement. Rarely, hiccups may be a sign of an underlying medical condition. A bout of hiccups usually lasts only a few minutes. But in some people, about one in 100,000, hiccups may persist for months. This can result in malnutrition and exhaustion.

**Symptoms:** The characteristic sound of hiccup, sometimes preceded by a slight tightening sensation in your chest, abdomen or throat, are the only signs and symptoms associated with hiccups. The number of hiccups a minute typically ranges between four and 60.

**When to see a doctor:** Make an appointment to see your doctor if your hiccups last more than 48 hours or if they are so severe that they cause problems with eating or breathing.

# Making Strides Against Cancer

## Risk Factors:

**Sex.** Men are much more likely to develop long term hiccups than are women.

**Surgery.** Several factors related to surgical procedures appear to increase your risk of developing long term hiccups. They include:

- General anesthesia
- Intubation, in which a tube is placed down your throat to help you breathe
- Neck extension, which is necessary during intubation.
- Abdominal distension, which is common after endoscopic procedures performed through small incisions
- Organ manipulation

**Mental or emotional issues.** Anxiety, stress and excitement have been associated with some cases of short term and long term hiccups.

## Complications.

Prolonged hiccups may interfere with:

- Speech
- Eating
- Sleeping
- Post surgical wound healing

## Preparing for your appointment.

While you may initially consult your family physician about your persistent hiccups, he or she may refer you to a doctor who specializes in neurological or gastrointestinal disorders.

## What you can do.

You may want to write a list that includes:

- Detailed descriptions of your symptoms
- Information about medical problems you've had
- Information about medical problems of your parents or siblings
- All the medications and dietary supplements you take
- Questions you want to ask the doctor.

**What to expect from your doctor.** In addition to performing a physical exam, your doctor may ask:

- When did your hiccups start?
- How often do they occur?
- Is there anything that worsens or alleviates them?
- What medications are you taking?

- Have you had a sore throat or earache?

He or she may also perform a neurological exam, to check your:

- Reflexes
- Muscle strength
- Muscle tone
- Senses of touch and sight
- Coordination
- Balance

**Tests and diagnosis.** If your doctor suspects an underlying medical condition may be causing your hiccups, he or she may recommend one or more of the following tests. Laboratory tests (samples of your blood) for signs of infection, kidney disease or diabetes. Or Imaging tests which may include a chest x-ray, CT scan or an MRI.

An **endoscopic test** may be used as well. These procedures utilize a thin, flexible tube containing a tiny camera, which is passed down your throat to check for problems in your esophagus or windpipe.

**Treatments & Drugs.** In most cases of hiccups they go away on their own, without medical treatment. If an underlying medical condition is causing your hiccups, treatment of that illness may eliminate the hiccups. See your doctor if your hiccups last over 48 hours.

**Although there's no surefire way to stop hiccups, if you have a bout of hiccups that last longer than a few minutes, the following home remedies may provide relief:**

- Swallow a teaspoon of sugar
- Breathe into a paper bag
- Gargle with ice water
- Hold your breath.

When long term hiccups don't respond to other remedies, alternative treatments such as hypnosis and acupuncture, may be helpful.

**You may be able to decrease your frequency of short term hiccups by avoiding common hiccup triggers, such as:**

- **Eating large meals**
- **Drinking carbonated beverages or alcohol**
- **Sudden changes in temperature.**

**Why Me?**

## Denial: Learn to cope with painful situations

Denial is an unconscious coping mechanism that gives you time to adjust to distressing situations. But when you stay in denial, it can interfere with treatment or tackling life challenges.

When someone says you're in denial, it generally means you aren't being realistic about something that's happening in your life, sometimes that may be obvious to those around you. Indeed, when you're in denial, you seem to be pretending that something isn't happening or isn't true.

In some cases, though, a little denial can be a good thing. Being in denial for a short period can be a healthy coping mechanism, providing time to adjust to a painful or stressful issue. But denial has a dark side. Being in a denial can prevent you from effectively dealing with issues that require action, such as a health crisis or financial problems.

Understanding denial and its purpose. Denial is a common type of defense mechanism that occurs in reaction to a trauma or perceived threat. It is a way of coping with emotional conflict, stress, painful thoughts, threatening information and anxiety by refusing to acknowledge that something is wrong—in essence, denying the existence of a problem. You may be in denial about something happening to you or happening to a loved one. In its strictest sense, denial is considered to be an unconscious process. You don't generally decide to be in denial about something. But some research suggests that denial may sometimes have a conscious component—on some level you

might be choosing to be in denial.

In either case, when you're in denial, you:

- Refuse to acknowledge a stressful problem or situation
- Avoid facing the facts of the situation
- Minimize the consequences of the situation

### Common reason for denial.

You may be in denial about anything that makes you feel vulnerable or threatens your sense of control over your life as:

- Mental illness or addiction
- Chronic or terminal illness
- Financial problems
- Job difficulties
- Relationship conflicts
- Traumatic events

Situations in which denial may be helpful. It may seem that refusing to face facts is never a healthy way to cope. In some cases, though, a short period of denial may be helpful. Being in denial gives your mind the opportunity to unconsciously absorb shocking or distressing information at a pace that won't send you into a psychological tailspin.

For instance, after a traumatic event, you may need several days or weeks to fully process what's happened and come to grips with the challenges ahead. Consider, for instance, what might happen when a woman discovers a lump in her breast one night as she's lying in bed. She feels a rush of fear and adrenaline as she

imagines it's breast cancer and immediately leaps to the conclusion that she's going to die. So she decides to ignore the lump, hoping that it will go away on its own. But when it hasn't gone away two weeks later, she consults her doctor.

**This type of denial is considered an adaptive—or helpful—response to stressful information.** The woman initially denied the distressing problem, but then as her mind absorbed it, she came to approach it more rationally and she took action by seeking help.

Situations in which denial may be harmful. But what if the woman had continued to be in denial about finding the lump and tried to forget about it entirely? What if she never sought help? In cases like that, **where denial persists and prevents you from taking appropriate action, such as going to the doctor, it's considered a maladaptive—or harmful—response.** Examples of unhealthy denial:

- A college student witnesses a violent shooting but claims he's not affected by it.
- The partner of an older man in the end stage of life refuses to help get affairs in order and tells others that he's getting better.
- A businessman periodically misses a morning meeting after drinking excessively the night before but insists he's still getting all his work done, so he doesn't have a problem.
- A couple are racking up so much credit card debt that they toss the bills aside because they can't bear to open them.
- The parents of a young daughter with drug addiction keep giving her "clothing money"

In situations such as these, denial prevents you or your loved one from getting help, such as treatment or counseling, or dealing with problems that can spiral out of control—all with potentially devastating long term consequences.

It isn't always easy to tell if denial is holding you back, but if you feel stuck or if someone you trust suggests that you're in denial, try these strategies:

- Honestly ask yourself what you fear
- Think about the potential negative consequences of not taking action
- Allow yourself to express your fears and emotions
- Try to identify irrational beliefs about your situation
- Find a support group.

Don't try to force someone to seek treatment, which could lead to angry confrontations. Offer to meet together with a doctor or a mental health provider. Consider counseling to help you cope with your distress and frustration.



## Planting Seeds of Faith, Hope and Charity

### " WHY ME?" THE ANTIGUA & BARBUDA CANCER SOCIETY

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## The Raffle is Still On!! Call For Your Tickets Now!!



*It can be so easy sometimes to forget to express the appreciation we feel for the little day to day things that happen in our lives and the many overlooked blessings we receive from those in our circle of influence.*

*Gratitude is designed to help us shift our focus away from what are many times perceived as negative conditions and circumstances and bring us back into the reality that all things, regardless of how perceived, assist us in our growth and bring us one step closer to our intended destination. Sincere Gratitude empowers you to focus on the positive aspects of life, and develops into greater awareness and appreciation of the overlooked often misinterpreted, and ever so important little blessing that make up this experience we call life. An attitude of gratitude can make the difference between experiencing the big blessings that life has to offer and falling short of all that is available to you. At times our own light goes out and is rekindled by a spark from another person. Each of us has cause to think with deep gratitude of those who have lighted the flame within us. For the voices you do not hear...we thank you so much!*

*WHY ME?*

## A Tribute To My Beloved Brother

My brother passed away June 11th. I guess I haven't come to reality with it until now. It's still like a dream.

As his oldest sister, I remember "Bubba" from the very beginning...I guess I just need to take a little walk down memory lane...kind of.

Now, I know that when someone passes away, there isn't any word long enough or big enough to describe it. I could talk about it and the newsletter would go on for pages and pages. But I know this little space can't replace an entire life. I loved you "Bubba". My baby brother, I will miss him for now, but some memories are still so fresh—that I can still relate to him—and know exactly—what he would say—if I were talking to him. As more time passes, I wonder if this will change. For now, I'll acknowledge and appreciate this. I've been working on a poem a song who knows...about him—it hasn't come out of me yet, but one day...I know it will.

"Bubba" achieved quite a lot for one so young (he was the baby of the family). It seems that only last week we were having a heated argument about Beyonce. I can still remember every word he said to me...and so will a few of our cousins. We were just laughing and goofing around like we did as kids.

But he left me—and he will not be picking up the telephone—to call me, his children—God keep them—will mature into wonderful adults and cherish the wonderful memories and lessons they have learned from him.

We (his family and friends) will miss his enthusiasm to be "Bubba" and no one could tell him anything. Yep, we will miss him so much.

The whole family will miss you, and me...well Bubba, I promise to continue

to grow strong in the love and strength that you stood for and gave so freely all of our lives.

**Rest In Peace My Beloved Baby Brother!**



**March 4, 1956 to June 11, 2009**