



GOOD OUTLOOK, GREAT OUTCOME

Thanks to the treatment and care from the multidisciplinary gynecologic cancer team at Saint Barnabas Medical Center, 33-year-old Tanya Galayda is now cancer free and looking to start a family in the future.

{ IN GOOD HEALTH }

When it comes to certain medical conditions, they say sometimes a positive mindset leads to positive results. And that, coupled with top-notch care, could explain why Tanya Galayda is doing so well a little more than a year after finishing treatment at Saint Barnabas Medical Center (SBMC) for stage 2B cervical cancer. Her case was a complicated one that involved radiation, chemotherapy, surgery and, since she was only 32 years old at the time of her diagnosis, freezing her eggs to ensure she could one day start a family with her husband, Nick. “I keep telling myself I’m one of the lucky ones,” Tanya says. “It could be so much worse. It’s all going to work out.”

Tanya’s cancer journey began in January 2020, when she went to see her gynecologist after suffering a miscarriage and experiencing irregular bleeding. That visit resulted in an abnormal pap, at which point she was referred to Thad Denehy, M.D., section chief of gynecologic oncology at SBMC and member of RWJBarnabas Health Medical Group. “I started crying when I got the diagnosis after my biopsy, and all I thought was, ‘Am I going to be able to have kids?’” the South Plainfield resident recalls. “Dr. Denehy basically said no, and I lost it.”

Because this human papillomavirus (HPV)-induced cancer was too locally advanced and extended outside of the cervix, Dr. Denehy explains, Tanya was not a good candidate for surgery and needed to begin a radiation and chemotherapy regimen immediately in an effort to shrink the tumor. And because of pandemic-related restrictions on non-essential surgeries at that time, Tanya could also not undergo fertility sparing surgery in which they would raise up her ovaries to alleviate the radiation exposure to the area. So, Dr. Denehy quickly referred her to the fertility partners at SBMC, since even a small dosage of pelvic radiation would kill off her ovaries and essentially put her through menopause. “I saw the fertility, chemo and radiation doctors all in one day,” says Tanya. “There was no time to process anything or think about what we were going to do.”

Of course, the goal with cancer is cure, “but she had this lifelong dream of having babies with her husband,” says Raquel Wagman, M.D., radiation oncologist at SBMC. “We were trying to weigh the quality of life issues with

what we thought would cure the cancer. We have a great reproductive endocrinology group that jumped into high gear to expedite the [fertility preservation] process.”

By April 2020, the peak of the pandemic, Tanya, a fifth-grade teacher who was teaching remotely at the time, began her radiation treatments at SBMC, all of which her family could not accompany her to due to COVID restrictions. She underwent 28 treatments, Monday through Friday, of external beam radiation therapy, where the beams target the uterus and cervix but protect the normal tissue, as well as five treatments of internal radiation, also known as brachytherapy. For these surgeries, Drs. Denehy and Wagman used applicators to locate the tumor via CAT scan or MRI, a much more sophisticated method than the X-ray of yesteryear. She also received low-dose chemotherapy once-a-week for six weeks with Jennifer Wagmiller, M.D., medical oncologist and hematologist, and her medical team says she responded well to treatment with minimal side effects—and always maintained her positive spirit.

“Our multidisciplinary GYN program is very collaborative,” says Dr. Wagmiller. “We always consult one another for anything—big, small, something expected, unexpected. That ensures we take the best care of our patients and is reassuring and easier for them [to have us all in one hospital].”

That July, Tanya and her husband were faced with a hard decision: She could either undergo a hysterectomy to ensure the cancer was gone, or opt out of the surgery and thus not confirm she was cancer free. “It was really tough, but I knew if I did the hysterectomy, there was no looking back,” she says. “And thankfully, when I did the surgery there was no

residual cancer and I was declared cancer free!”

Tanya, now 33, continues to see Dr. Denehy for follow-up appointments. She and her husband are also not giving up on their dreams of becoming parents and are currently pursuing surrogacy.

“This was such a big part of my life but it was a part of my life that’s done with,” she says. “I always want my story to be a positive one. It’s a happy ending, regardless of what happens next.”

HOW COMMON IS CERVICAL CANCER IN WOMEN IN THEIR 30S?

It is “not rare,” says Dr. Wagmiller, but screening is essential to prevention. “Cervical cancer screening should start at age 18 or once a patient becomes sexually active,” Dr. Wagmiller adds. “It’s important for parents and young people to consider getting vaccinated for HPV.”



Thad Denehy, M.D.



Raquel Wagman, M.D.



Jennifer Wagmiller, M.D.

“We have a high-volume gynecologic cancer center at Saint Barnabas Medical Center, and studies have shown this results in better outcomes. This affords great care because we’ve seen similar cases over and over. We also have multidisciplinary tumor boards every month where we discuss our cancer cases and review each patient’s individualized care plan.”

—Thad Denehy, M.D., section chief of gynecologic oncology, Saint Barnabas Medical Center



Saint Barnabas Medical Center, together with Rutgers Cancer Institute of New Jersey, the state’s only NCI-designated Comprehensive Cancer Center, bring the most advanced treatments to patients close to home. To learn more or to schedule an appointment with the Gynecologic Cancer & Pelvic Surgery team at Saint Barnabas Medical Center, call 844.226.2376.