

LIVING WITH BREAST CANCER

When your partner has
metastatic (secondary)
breast cancer

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About this booklet

If your partner has metastatic (secondary) breast cancer, it's natural to feel worried or scared. You probably have lots of questions about what to expect and how treatment will affect your partner.

In this booklet, you'll find out more about metastatic breast cancer. We'll also suggest ways you can support your partner and how to look after yourself too.

You don't have to read this booklet from cover to cover if you don't want to. You can pick out the sections that are helpful to you now and come back to the other sections when you feel ready.

You may find it useful to read this booklet alongside our **Secondary breast cancer information pack**, which also contains more information about caring for someone with metastatic breast cancer.

If you'd like to talk to someone about how you're feeling or have questions about the information in this booklet, call us free on **0808 800 6000**. Or you can email Ask Our Nurses through our website **breastcancernow.org**

You can also find out more information about caring for someone with metastatic breast cancer on our website.

This booklet is about metastatic breast cancer (breast cancer that has spread to other parts of the body). If your partner has been diagnosed with primary breast cancer (breast cancer that has not spread beyond the breast or the lymph nodes under the arm), you may find our **When your partner has breast cancer** booklet helpful.

Diagnosis

Metastatic breast cancer happens when breast cancer cells spread to other parts of the body. You may also hear it called:

- Secondary breast cancer
- Secondaries
- Metastases
- Advanced breast cancer
- Stage 4 breast cancer

Cancer cells can spread through the blood or the lymphatic system. The most common areas breast cancer can spread to are the:

- Bones
- Lungs
- Liver
- Brain

Sometimes other parts of the body are affected, such as the lymph nodes in the chest, armpit or neck area, or the skin or belly (abdomen).

Metastatic breast cancer usually occurs years, or sometimes months, after primary breast cancer. However, sometimes it's diagnosed at the same time as or before the primary breast cancer. This is called "de novo" metastatic breast cancer.

Metastatic breast cancer can be treated but it cannot be cured. Treatment aims to control the cancer, relieve symptoms, and maintain a good quality of life for as long as possible.

How you might feel

Finding out your partner has metastatic breast cancer is very difficult, and there's no right or wrong way to feel.

You may have lots of questions about what will happen to your partner and what impact metastatic breast cancer will have on your life. You may also be scared of your partner dying.

It's normal to be concerned about the future. It can help to take things a day at a time.

Your feelings may change as the weeks and months go by.

Some people continue to find it difficult to cope with how they're feeling. If this is the case, you could talk to your GP or your partner's specialist nurse, with your partner's permission.

You may also find it helpful to call our helpline on **0808 800 6000**. There's more information about looking after yourself on page 28.

How your partner might feel

Most people are shocked to hear they have metastatic breast cancer and often have many different emotions.

Your partner's feelings may change from day to day and even hour to hour. How they feel may depend on many things, including their personality, cultural background, how prepared they were for the news, and their experience of primary breast cancer.

Some people feel they must put on a brave face for family, friends and even for the doctors and nurses looking after them. Others prefer to share their feelings and draw strength and support from people close to them.

Sometimes you and your partner will have similar feelings at the same time. At other times, your feelings will be very different, which can be difficult.

For more information on how your partner might feel, see our **Secondary breast cancer information pack**.

Getting information about metastatic breast cancer

While you're coming to terms with your partner's diagnosis, you and your partner will be given lots of information about test results, treatments and side effects.

You may want to learn as much as possible, go to appointments with your partner and be involved in discussions about treatment decisions. Or you may prefer to be a quiet support. Everyone's different.

How involved you are will depend on your own and your partner's wishes. It can be helpful to talk to your partner early on about how they would like you to be involved.

Some people say they feel helpless while their partner is having treatment for metastatic breast cancer. Finding a practical role can be a good way to provide support. This could involve taking notes during appointments or making lists of questions to ask the treatment team. There's more information on supporting your partner on page 14.

Whichever approach you take, having some basic information, and knowing how and where to find out more, is often helpful.

Many people use the internet to look for information. Depending on how your partner feels, this may be something you want to do together or alone.

Be aware that some online information can be unreliable, so our website **breastcancer.org** is a good place to start. It can also be helpful to focus on trustworthy websites that reflect UK practice, such as NHS UK, Macmillan Cancer Support, Marie Curie and Cancer Research UK.

If you don't have access to the internet, or prefer not to use it, we have a range of printed publications about metastatic breast cancer. Our helpline is also here if you would like more information or to talk to someone.

Metastatic breast cancer treatments

Your partner will be offered treatment for metastatic breast cancer.

The treatment they're offered may depend on where the breast cancer has spread to and any treatment they have already had. You can find out more about treatment for metastatic breast cancer in our **Secondary breast cancer information pack**.

The aim of treatment for metastatic breast cancer is to:

- Control and slow down the spread of cancer
- Relieve symptoms
- Give your partner the best quality of life for as long as possible

Several healthcare professionals may be involved in your partner's care. Your partner may see some of these regularly and others only when they need to. But it's important to know what help is available to your partner.

The healthcare professionals may be:

- An oncologist (a doctor specialising in cancer)
- A specialist nurse
- A GP
- A district or community nurse
- A palliative and supportive care team/home care team
- An occupational therapist
- A social worker
- Social services

Your partner may also have input from hospices, or Marie Curie or Hospice at Home nurses. You can find more information about hospice care on page 34.

Decisions about treatment

Your partner may be given choices about their treatment, and they might ask you for advice and support in making these decisions.

Talking about the options with your partner can help you to understand their thoughts and clarify any questions they may have for their treatment team.

It's important to be guided by your partner about how much information they want about treatment options. It's also helpful to acknowledge that your partner's questions may be different to yours and that any treatment decisions are theirs to make.

Supporting your partner to gain the information to make an informed choice can help them feel more in control.

It can be difficult if your partner makes decisions you don't agree with, but it's important to consider their feelings and respect their choices.

Side effects of treatment

Treatments for metastatic breast cancer cause side effects. Everyone reacts differently to treatment and some people have more side effects than others.

Before starting treatment, your partner can ask their treatment team what side effects they may have and what steps will be taken to try to reduce these.

Physical and emotional changes

Hair loss

Your partner may lose some or all of their hair as a result of their treatment for metastatic breast cancer.

There's no right or wrong way to feel if your partner loses their hair. Some people can struggle with changes to their partner's appearance, while others do not.

Many people choose to wear a headscarf, hat or wig when they lose their hair. Your partner may like you to be involved in choosing a wig or headwear, and this may help you adjust to their hair loss.

For more information on hair loss and thinning, see our booklet **Breast cancer and hair loss**.

Extreme tiredness (cancer-related fatigue)

Cancer-related fatigue is one of the most common symptoms in people with metastatic breast cancer.

Fatigue is extreme tiredness that does not go away with rest or sleep. It has many causes, from the emotional impact of a diagnosis to side effects of treatment or growth and spread of the cancer.

Fatigue may affect how your partner copes with cancer and its treatment. It can also make everyday activities harder and affect their quality of life.

You can find out more information about how to help your partner manage extreme tiredness on our website **breastcancer.org**

Menopausal symptoms

Metastatic breast cancer treatments can cause menopausal symptoms.

Menopausal symptoms include:

- Hot flushes
- Night sweats
- Vaginal dryness
- Weight gain
- Mood swings
- Loss of sex drive

These can affect your partner's self-esteem, body image and confidence. Encouraging your partner to talk, and listening to how they are feeling, can help you understand how you can best support them.

You can find out more information about menopausal symptoms on our website **[breastcancer.org](https://www.breastcancer.org)**

Low mood

It's normal for your partner's mood to be affected when they've been diagnosed with metastatic breast cancer. This could be because of:

- Symptoms of the cancer
- Side effects of treatment
- Thoughts about the future
- The impact of their breast cancer on home life and relationships

Your partner may experience low mood from time to time, or the low mood may continue. You can encourage your partner to talk to their treatment team or their GP. They may refer your partner to a counsellor, psychiatrist or psychologist for help and support.

Supporting your partner

Knowing how best to support your partner after their diagnosis is not always easy. It can be hard to know what your partner needs, and their needs may not be the same as yours.

Communicating with your partner

An important way to support your partner is by communicating effectively with them.

It's natural to want to avoid difficult topics of conversation and to try to "fix" things, but it's not always possible to offer solutions. Offering advice and opinions your partner hasn't asked for may make them feel less understood.

Simply hearing and acknowledging your partner's worries can be very reassuring.

There may be times when you don't feel able to listen sensitively to your partner. You could suggest a break from listening and arrange to return to the conversation later. This can also give you time to take things in and start again feeling more refreshed.

Useful tips for active listening

INFO

- **Avoid distractions** – sit somewhere quiet, switch off the TV and put mobile phones away
- **Let your partner know you're listening** – look at them, nod or ask questions and make comments
- **Check you've understood what your partner has said** – repeat back words they use and try to summarise what you've heard. For example: "It sounds like you feel... Have I got that right?" This shows your partner you're listening and allows them to correct you if you've misunderstood
- **Avoid interrupting while your partner is talking** – make sure your partner has finished saying everything they want to before you reply
- **Encourage silence** – silence can allow time to think about what has been said and how you may want to respond. It may feel awkward at first but try not to rush in if there's a pause or break in conversation
- **Use touch to provide comfort** – if it's appropriate, and you know your partner values physical touch, you could hold their hands or give them a hug

Talking with your partner

Many people with breast cancer find it helpful to talk about what they're thinking and how they're feeling. However, some people prefer to cope on their own and don't want to discuss their emotions or their diagnosis.

Encouraging conversations

Try to understand how much your partner wants to talk.

If they begin to tell you something about their cancer, ask them if they want to talk more about it.

If they do, you could encourage them to talk by asking gentle, open-ended questions. For example, you could say: "What did you feel like when the doctor said...?" or "You said you feel frightened. What is it that frightens you the most?"

If your partner is feeling angry about their diagnosis, they may sometimes direct this anger at you. This reaction can be hurtful, particularly if you're trying to support them. But try to remember this is often because they're upset about having cancer, rather than being upset with you.

You might try to avoid having difficult conversations with your partner to protect them from your worries and fears. However, avoiding conversations may make your partner feel like you're not interested in how they're feeling.

Open communication about how you're both feeling can help you to understand and support each other and bring you closer together. It could also encourage your partner to share their feelings honestly with you.

However, there may be times when one of you doesn't feel like talking or when you can't talk openly.

Useful tips for talking

INFO

Often, being able to talk comes down to finding the time and space to do so. It might be helpful to set aside a time when you're able to talk undisturbed, somewhere you both feel at ease.

Some people find it easier to talk when they're not looking at each other face-to-face. It might help you speak more freely if you talk while doing something else, such as when you're walking, driving or eating together.

It's important you and your partner continue to talk about everyday things. Having a "normal" conversation can help you both feel that cancer hasn't taken over your life.

Communicating in other ways

There are other ways to show your partner you care, such as:

- Physical affection, like a hug or holding hands
- Spending quality time together and if possible enjoying each other's company outside the house, such as a local coffee shop or park
- Taking a short break or holiday away from home – your partner can discuss this with their specialist nurse or treatment team
- Simple thoughtful gestures, such as running a bath or giving small gifts you know they'll appreciate

If you need support with communicating

If you're having problems communicating with your partner, there are places to go for help. Along with our helpline and website, you may also benefit from contacting an organisation such as Relate (see page 41).

Attending appointments

Your partner may find it supportive if you go to appointments with them. Or they may prefer to go to some or all of their appointments on their own.

If they do want you to go with them, it may help to talk beforehand about how involved they want you to be in discussions. You can also plan any questions you want to ask.

If you're working, taking time off to attend appointments may not always be easy. Try to find out how long your partner may be at the hospital for and how long any treatment sessions last. Then try to come to a suitable arrangement with your employer.

Some employers may expect you to use paid or unpaid holiday, while others are more flexible.

Carers' rights at work

INFO

Carers' rights at work are protected by law. If you're caring for someone with metastatic breast cancer, you may be able to ask for flexible working or carer's leave to help you balance work and caring responsibilities. Under the Carers' Act 2023, if you are employed you are entitled to 1 week of unpaid leave for caring purposes. Your employer cannot reject this, but they may ask you to postpone it.

If you can't attend an appointment in person, it might be possible to attend virtually or on the phone. Alternatively, with the permission of your partner's specialist, your partner might be able to record the consultation so you can listen to it together afterwards. You may also be able to speak to your partner's specialist nurse, with your partner's consent.

Practical support

Many people want to carry on doing as much as possible when they've been diagnosed with metastatic breast cancer. However, cancer and its treatment may make it more difficult to continue with everyday tasks, and asking for help is not always easy.

Offering to do more practical tasks can be a very useful way of supporting your partner. This could include:

- Shopping
- Cooking
- Cleaning
- Washing
- Administration, such as sending emails or paying bills
- Childcare responsibilities
- Driving
- Gardening

It can be a good idea to ask your partner what they would like you to do, so they can continue to do the things they want to do themselves. This will help them feel in control.

Changes to your relationship

When your partner is diagnosed with metastatic breast cancer, it will often change your relationship with them.

Some couples become closer and their relationship gets stronger.

But if your partner was previously independent and becomes emotionally or practically dependent on you, this can put a strain on your relationship.

You and your partner may take on different roles in the relationship compared to before. This can be difficult to cope with.

Therapy can be very helpful. Discussing your feelings with someone impartial can help you both to see things more clearly. Some people find this helpful earlier in a diagnosis, while others find it useful later.

Organisations like Relate (details on page 41) offer relationship counselling.

Many hospitals also have counselling services, some specialising in cancer, and there may be services in your local community too.

Your workplace may also offer support.

LGBTQ+

Being diagnosed with metastatic breast cancer affects LGBTQ+ relationships in many of the same ways as heterosexual relationships. However, you may have different concerns if you or your partner identify as LGBTQ+.

Your partner's treatment team will be better able to support you both as a couple if they are aware of your sexual orientation or gender identity. It can help to talk to your partner about any concerns either of you may have about this.

You can find further support and information at LGBT Foundation, Stonewall and OUTpatients. See pages 40 and 41 for more details.

Sex and intimacy

Being diagnosed with metastatic breast cancer will almost certainly affect how your partner feels about sex and intimacy.

They might experience a lack of confidence, low libido and altered body image due to the side effects of treatment.

Changes to your partner's body during treatment may also affect how you feel about them sexually. Getting used to looking at these changes together may help make being intimate easier in the long term. Sometimes, the longer you leave this the more difficult it can be.

You may both be too tired to even think about sex. Or you may want to have sex but both be nervous about how it will feel.

Although it's important not to make any demands on your partner, it's equally important you don't ignore your own feelings.

If you're frightened of hurting your partner during sex, let them know how you feel. It can be difficult to talk about sex, but talking and listening to each other's concerns can help avoid misunderstandings.

You may be able to discuss and explore other ways to have sex or be intimate that are comfortable and satisfying for you both.

Find out more about sex and intimacy during breast cancer in our booklet **Your body, intimacy and sex**.

If you're having problems, you and your partner might find it helpful to talk to the specialist nurse or GP. You might also find it useful to contact a specialist organisation like Relate or the College of Sexual and Relationship Therapists (COSRT). Or you may want to discuss your feelings with a counsellor, either together or separately.

Planning a family with a diagnosis of metastatic breast cancer

Many treatments for metastatic breast cancer can affect your partner's ability to have children. Your partner may be advised not to become pregnant because treatment may harm a developing baby.

If your partner was diagnosed with metastatic breast cancer before you started or completed your family, you may have questions or concerns about this.

Adding to your family once your partner has been diagnosed with metastatic breast cancer will need much careful thought and discussion. It may be helpful to discuss this with a clinical psychologist, as well as your partner's treatment team.

If your partner is concerned about their fertility, they should discuss this with their treatment team ideally before starting treatment.

Family and friends

Telling family and friends

Telling family and friends your partner has metastatic breast cancer can be very difficult. Before you do this, you and your partner may want to discuss who to tell and when and how much to tell them.

At first your partner may not want to let people know. However, if you have a close network of family and friends it can be more stressful not telling them.

Some people may react to the news better than others, and some people won't know what to say.

There may be friends or family members who can't deal with the news and withdraw from you. They may be worried about what's going to happen and frightened about your partner dying. It can also make them think about their own death. All these things may affect how people relate to you.

Often people simply don't know what to say or how to behave. Friends may stop calling you both, sound uncomfortable when they do or keep their distance because they think you won't want company or to hear their news.

You and your partner may feel friends and family don't understand the support you need. If you can talk to them about how you're feeling and what you need from them, they can begin to understand how best to support you both.

Practical help may be easier to find from friends than emotional support.

Involving family and friends

Friends and family may offer their support straight away and go out of their way to help. Some people may want to be supportive but worry about intruding at a difficult time.

If you want to involve other people, it's important to let them how they can help without putting them under any pressure.

Talk with your partner about the things you may be struggling with so you know what to say if people do offer to help. It may be useful to offer a choice of tasks, such as cooking, cleaning, shopping or collecting children from school. It may be more convenient for someone to do one thing rather than another.

Sometimes it can be hard to let go of things you feel responsible for, such as taking your partner to hospital appointments or food shopping. However, allowing someone else to help occasionally will free up your time and give you a chance to relax.

If you have plenty of practical help but not enough emotional support, a friend or a family member might be happy to listen to you. Try to maintain these relationships and any activities you share, as they may help you feel less isolated.

Speaking to someone who understands

You or your partner may want to look for a support group to help you meet people who understand what you're going through. Some people also find sharing experiences online helpful – you could try our online forum **forum.breastcancer.org**

You can also talk to someone in your partner's treatment team, with their consent, such as a specialist nurse or palliative care nurse, or you could ask to be referred to a counsellor.

Dealing with visits or calls

You may find that people drop in to see you and your partner. Although this is well-intended, unplanned visits can be inconvenient. If your partner is feeling upset or unwell, or if you're tired or not in the mood for company, this can be frustrating.

It might help to work out the times and days that are best for you both to have visitors. You can then let your friends and family know these. This way you'll be less likely to be caught at an inconvenient time.

There may be times when you prefer not to take phone calls. Letting people leave a message or encouraging them to text or email so you can respond when you're ready can help in the short term.

However, try not to put off calling people back as they may think you're avoiding them. If answering calls becomes too stressful, try emailing or texting people to keep them up to date. Or ask a willing relative or friend to keep people informed on your behalf for a while.

Families can be complicated, and there may be some people who you have a strained relationship with. With so much happening, you may feel it's not the right time to rebuild relationships, or you may want to put things aside and resolve any issues. Try not to let any existing tension become worse.

If you have children

Children and teenagers

It can be difficult to know how to talk to your children about metastatic breast cancer.

Our booklet **Talking with your children about metastatic (secondary) breast cancer** contains information and support about telling children and teenagers about metastatic breast cancer.

Your partner's specialist nurse can tell you about local services that can support you when talking to your children.

Adult children

Although your children are adults, it's normal to want to protect them from difficult situations.

Adult children may have a better understanding of what metastatic breast cancer means than younger children. They may want to be involved in conversations about treatment and the future. It may help for you and your partner to ask whether any adult children want to be involved in this way.

Your partner's relationship with their adult children may change once they learn they have metastatic breast cancer. Adult children may take on a more parental role, which can be difficult for your partner.

Looking after yourself

Caring for someone with metastatic breast cancer can be isolating and lonely. It's normal to feel overwhelmed but it's important to look after yourself.

Tips for looking after yourself

INFO

- Make sure you eat well
- Get regular exercise
- Try to get enough sleep
- Take time to relax and de-stress using techniques that work for you, such as mindfulness, complementary therapies or counselling – ask your GP about any support available in your local area
- Take time for yourself – try going for a walk, meeting a friend or writing down your thoughts

Taking breaks from caring for your partner can also help you look after yourself. This may be while your partner is at a day centre, wellbeing service or has a respite break. You can talk to your GP or local social services about what support might be available in your area.

If you're finding it difficult to do these things or are feeling overwhelmed, let a friend, family member or your GP know.

It's important to focus on your own health. Talk to your GP if you feel unwell and explain your caring responsibilities to them. You may also find it helpful to call our helpline on **0808 800 6000**.

Carer's assessment

INFO

The NHS can carry out a carer's assessment to see if there are any ways to help support you. You can find out more about this on the NHS website [nhs.uk](https://www.nhs.uk)

In Scotland it's called an adult carer support plan or in Wales a carer's needs assessment.

Coping at work

Some people continue to work after a diagnosis of metastatic breast cancer and only take time off to attend appointments and have treatment. Others find it difficult to cope with work.

Partners of people with metastatic breast cancer can also find it difficult to continue working or to work the same hours as before.

You or your partner may need to stop working or reduce your hours at work. This may put pressure on your finances and change the dynamics of your relationship.

If you're struggling to work while your partner has treatment, you could consider talking to your employer about measures that might help you manage.

You may be able to work flexible hours, work from home or take time off to be with your partner.

You could also look at ways to try to ease the pressure of your work. If your employer has an HR department or occupational health adviser, they may be able to offer you support at work.

Talking to other people

It can help to talk to close friends or family about how you're feeling.

Occasionally you may feel very alone, even if you have friends and family around you. It can seem that no one else really understands what you're going through.

Having somebody to talk to can help you feel supported and prevent you becoming overwhelmed. Communicating with people in a similar situation can help. You may find our online forum **forum.breastcancer.org** a good place to start.

You can also call our helpline on **0808 800 6000**.

Anticipatory grief

Anticipatory grief is a feeling of sadness or loss that happens before someone dies.

Feeling grief while your partner is still alive can be complicated. You may still have hope, while at the same time preparing for when your partner dies.

It's not just grief for the coming loss of your partner, but also the loss of a companion, shared memories and future plans.

Everyone experiences anticipatory grief differently, and there's no right or wrong way to feel. Fear, regret, anger and guilt are common.

Managing these emotions over time can be tiring and lonely, especially if you don't have anyone to talk to about how you're feeling.

You can talk to someone you trust if you're struggling with anticipatory grief. This could be a counsellor or a trusted friend or family member. Talking about how you're feeling might help you process your anticipatory grief.

Sue Ryder and Marie Curie have more information on anticipatory grief on their websites – see pages 40 and 41.

Talking to your partner about dying

It may be difficult talking to your partner about them dying, and it's understandable to want to avoid these conversations.

However, talking openly about dying may help your partner express their feelings and wishes about treatment and care. It may also help you gain some control over the situation and feel more prepared.

Marie Curie has more information and resources on talking about dying on their website mariecurie.org.uk

Advance care planning

Your partner may have already had thoughts and talked about their wishes for future care. They may want to record these. This process is often called advance care planning.

This involves making decisions about future care with health and social care professionals. These wishes can then be followed if your partner cannot make decisions in the future.

Advance care planning is voluntary and can include anything about your partner's future care and support. This includes how they feel about different types of care and treatment and nominating a lasting power of attorney. It should be reviewed regularly to make sure it's still a true reflection of your partner's wishes and beliefs.

It can be helpful to write down your partner's choices. This is so doctors will know what their wishes are if they become unable to discuss them or make decisions. It also lets you and your partner's friends and family know what they want.

Marie Curie, Compassion in Dying and Macmillan have useful resources to help with this. Their details are at the end of this booklet.

Palliative or hospice care

Palliative care

Palliative care aims to:

- Manage and control the symptoms of metastatic breast cancer
- Improve quality of life

You may also hear it called supportive care.

Palliative care can be given at any time after a metastatic breast cancer diagnosis.

INFO

Although it includes end of life care, having palliative care does not necessarily mean your partner is likely to die soon. Some people can have palliative care for a long time.

Your partner may have palliative care alongside treatments such as chemotherapy, radiotherapy and hormone therapy.

Palliative care can be given in your partner's own home, or in a hospital or hospice. It includes emotional, spiritual, social and practical support for your partner. It also offers support for you and other family members, friends and carers.

Your partner's GP or a member of their treatment team can refer your partner for palliative care.

Your partner's specialist nurse should also be able to give you information about local palliative care services. You can read more about palliative care at Marie Curie and Sue Ryder websites.

Hospices and hospice care

Many people associate hospices and hospice care with dying. Although hospices do provide end of life care, they also offer palliative care and support at any stage of a life-limiting illness such as metastatic breast cancer.

What is a hospice?

A hospice is a place that provides specialist care and support to a person with an incurable illness such as metastatic breast cancer.

It also provides:

- Support for friends and family
- Spiritual support
- Financial information
- Bereavement care

What is hospice care?

Hospice care offers medical care, advance care planning and emotional and practical support.

Your partner may have hospice care at home or in a hospice. Hospice care is not always continuous and can be accessed as needed. Your partner can take breaks from hospice care if their condition is stable and they're feeling well.

Hospice care includes:

- Nursing care
- Physiotherapy
- Occupational therapy
- Dietitian services

A hospice can provide both inpatient care and outpatient care.

Examples of inpatient hospice care include:

- Respite care
- Symptom control
- Palliative care
- End of life care

Examples of outpatient hospice care include:

- Counselling
- Support groups
- Complementary therapies

You can speak to your GP or your partner's treatment team, or visit Hospice UK's website, to find hospices near you.

Finding out more information

INFO

It's helpful to know the contact details for the team caring for your partner, such as their palliative or hospice nurse, or GP.

You can also find out more information about palliative and hospice care from the following organisations, whose details are at the end of this booklet:

- Hospice UK
- Marie Curie
- Sue Ryder
- Macmillan Cancer Support

About the following information



The following pages cover end of life, including end of life care and when your partner dies. You might find it helpful to have a trusted friend or family member with you when you read this.

You can find further support and information from page 39 onwards.

End of life

There may be a time when your partner is told they're coming towards the end of their life.

This means the doctors will stop actively treating your partner's metastatic breast cancer and will instead focus on controlling their symptoms. It doesn't mean your partner will die immediately.

What is a DNACPR?

INFO

Your partner's treatment team may speak to them about a document called a DNACPR. This stands for "do not attempt cardiopulmonary resuscitation".

You can find more information about a DNACPR on Marie Curie's website mariecurie.org.uk

Your partner may or may not want to know how long their doctor thinks they have left to live. If your partner doesn't want to know, you can ask if they'd be happy for you to know.

End of life care

End of life care is a form of palliative care people have when they're close to the end of life. End of life care is tailored to the person who needs it and reflects their wishes and individual needs.

Your partner, and those close to them, should be involved in any decisions about their care.

End of life care also includes supporting those close to your partner, such as you.

When your partner dies

Everyone experiences grief differently. There's no right or wrong way to grieve, even if you've known for a while that your partner is going to die.

How you deal with the death of your partner will be different for everyone. Marie Curie has information on the emotional and physical impact of grief as well as managing the practical tasks when someone dies.

Telling family and friends your partner has died

Telling your family and friends that your partner has died can be difficult even when it's expected.

It might help for you and your partner to discuss how they want people to know when they die. It can also help to talk about this with friends or family, so they can prepare themselves for this conversation.

Marie Curie produces a booklet called *When someone dies*, which gives practical and emotional advice.

Further support and information

Breast Cancer Now support

You can call our free helpline on **0808 800 6000** and speak to our specialist nurses about your partner's metastatic breast cancer.

You can also find people going through the same on our online forum **forum.breastcancernow.org**

Other support and information

Carers UK

- carersuk.org
- Offers support and information for unpaid carers

Citizens Advice

- citizensadvice.org.uk
- Offers specialist benefits advice for individuals and families affected by cancer

College of Sexual and Relationship Therapists (COSRT)

- cosrt.org.uk
- Professional body dedicated to psychosexual and relationship therapies

Compassion in Dying

- compassionindying.org.uk
- Supports and amplifies the voices of people at the end of their lives

Cruse Bereavement Support

- cruse.org.uk
- Offers bereavement support

Hospice UK

- hospiceuk.org
- Promotes hospice care for everyone who needs it

LGBT Foundation

- lgbt.foundation
- Delivers advice, support and information services to lesbian, gay, bisexual and trans (LGBT) communities

Macmillan Cancer Support

- macmillan.org.uk
- Offers free, confidential support to people living with cancer and their loved ones

Maggie's

- maggies.org
- Offers free expert care and support in centres across the UK and online

Marie Curie

- mariecurie.org.uk
- UK's leading end of life charity, providing support and information to people living with a terminal illness and their loved ones

NHS UK

- [nhs.uk](https://www.nhs.uk)
- NHS website for England, offering guidance on all aspects of a cancer diagnosis

OUTpatients

- [outpatients.org.uk](https://www.outpatients.org.uk)
- Supports and advocates for LGBTIQ+ people affected by cancer

Relate

- [relate.org.uk](https://www.relate.org.uk)
- Offers relationship support and counselling

Ruth Strauss Foundation

- [ruthstraussfoundation.com](https://www.ruthstraussfoundation.com)
- Provides emotional support for families to prepare for the death of a parent

Stonewall

- [stonewall.org.uk](https://www.stonewall.org.uk)
- Advocates for LGBTQ+ rights

Sue Ryder

- [sueryder.org](https://www.sueryder.org)
- Provides free, expert care for those affected by life-limiting illnesses

The Good Grief Trust

- [thegoodgrieftrust.org](https://www.thegoodgrieftrust.org)
- Supports those affected by grief in the UK

Call our helpline on **0808 800 6000** or visit **breastcancernow.org**

The Loss Foundation

- thelossfoundation.org
- UK bereavement charity supporting adults who have a loved one die from cancer

Working with Cancer

- workingwithcancer.co.uk
- Provides career coaching and support to people with cancer and working carers



We're the UK's leading breast cancer charity. And we're combining the power of science and support to change breast cancer.

Life-saving science

Uncovering how breast cancer develops and spreads. New and better treatments that can find and destroy cancer cells. And one day, cures that can stop it in its tracks entirely.

Life-changing support

Expert information on everything from signs and symptoms to chemotherapy. Help so you can live well. Meeting people who are going through the same thing – people who just get it.

Change-making campaigns

Making sure everyone knows the importance of checking their breasts and chests, and the signs to look out for. Pushing for better diagnosis and care. Making sure everyone can get the drugs they need.

We don't get any government or NHS funding for our information or support. We rely on our supporters to make change happen.

So if you've found this information helpful and you'd like to support us, go to: **breastcancernow.org/give**

About this information

When your partner has metastatic (secondary) breast cancer was written by Breast Cancer Now's clinical specialists, and reviewed by healthcare professionals and people affected by breast cancer.



For a full list of the sources we used to research it:
Email health-info@breastcancer.org



You can order or download more copies from:
breastcancer.org/publications



We welcome your feedback on this publication:
health-info@breastcancer.org



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Medical disclaimer

We make every effort to ensure that our health information is accurate and up to date, but it doesn't replace the information and support from professionals in your healthcare team. So far as is permitted by law, Breast Cancer Now doesn't accept liability in relation to the use of any information contained in this publication, or third-party information included or referred to in it.

**BREAST
CANCER
NOW**

Whatever breast cancer brings, we're here.

Information on everything from symptoms to treatment and beyond. Support to help you live well. Meet people going through the same thing – people who just get it.

We're here with life-changing information and support now. Whatever you're going through. However you need it.

Call **0808 800 6000** to talk to one of our nurses.

Visit **[breastcancer.org](https://www.breastcancer.org)** now for breast cancer information you can trust.

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