At 85 I have boundless energy

‘My scar reminds me I’m still here’
Welcome to Vita

Do you sometimes feel you just aren’t on top of things? Do you have more trouble concentrating or remembering things than you did in the past? If so, you could be experiencing what medical experts call ‘cognitive impairment’ – commonly known as ‘chemo fog’. But it doesn’t just affect people who’ve had chemotherapy. Anyone who’s been treated for breast cancer can experience the effects of cognitive impairment. On page 12, we give some practical tips to help you find your way out of ‘the fog’.

This issue’s hot topic is breast reconstruction. The choice of whether or not to have reconstruction is very personal. On page 18, we speak to three women who made different decisions for different reasons.

Remarkably, there’s almost 60 years’ difference in age between our oldest and youngest real-life stories this time. Dorothy – who’s 85 and is on our cover – talks about her experience of going through treatment. While on page 11, Katie tells us about having risk-reducing surgery at 27. It goes to show that breast cancer touches people of all ages and all walks of life.

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In this issue

On the cover
6 Hair style after chemotherapy
8 My scar reminds me I’m still here
9 At 85 I have boundless energy
12 Find your way out of the fog
14 Pain after surgery

Real lives
10 Our online friendship was a lifeline
11 The second I came round I felt relieved

Hot topics
18 Reconstruction: your choices
20 Get the financial support you need

Regulars
3 Your letters
4 News and views
16 Your questions answered
21 Good food
22 Fundraising
25 Service dates
Dear Vita

I have just reread your article on sleepless nights [issue 26, winter 2015/16], and I thought I would pass on my strategy that I use to fall asleep. I’m 65 years old and was diagnosed with breast cancer after a routine mammogram in 2006. I had many sleepless nights, until my daughter suggested ‘the alphabet game’. You choose a subject – flowers, composers, football teams, authors, anything that interests you – and start at ‘A’ e.g. apple, banana, cherry, date… It must engage a part of the brain that switches something else off. Sometimes I fall asleep while trying to think of a new subject!

L Shaw

Dear Vita

I enjoyed reading your winter 2015/16 magazine, and was struck by a similar theme in the articles by Mandy Macfarlane and Liz O’Riordan. They both mentioned the false optimism created by people suggesting, pre-diagnosis, that there’s probably nothing to worry about.

I was told by my GP and the breast surgeon at my hospital that my symptoms were ‘probably just a bit of scar tissue’. When I went to get the results of the biopsies and scans, I was planning to go alone as I wasn’t expecting bad news. Luckily a wise friend – a nurse herself – insisted on coming with me. Without her I would not have been able to process the diagnosis of breast cancer or take in the plans the doctors had made for my mastectomy.

My hospital trust recently carried out a review of how they handle all aspects of treating breast cancer. I was able to give feedback about the effect of over-optimistic predictions, and they have taken it on board, along with many other suggestions made by patients. It’s a welcome initiative from a department which already delivers a great-quality service.

Mary

Dear Vita

I was diagnosed with secondary breast cancer when I was 48. The diagnosis was an incredible shock. I had recently started a new job that I enjoyed and, after years of being miserable in my previous job, I was beginning to feel ambitious again. The most upsetting thing was the idea of not being there in future for my children, who were aged 16 and 19.

However, I wanted my life to carry on as normal as possible. That was easier said than done. The side effects of medication meant that I was having night sweats and sleepless nights, and was also in pain. I took a gym mat into work so that I could go and have a lie down in the store cupboard in my lunch break as I was so tired.

My stress levels went up and up. I’ve been off on sick leave and feel so much better. I feel like I have taken control of my life again. I value everything and everyone around me more. I know I won’t get better, but I feel so much better.

Claire
An oarsome achievement

The Coxless Crew rowing team has completed an epic nine-month row across the Pacific Ocean. Not only did they set two world records, but they’ve raised over £45,000 for Breast Cancer Care and Walking with the Wounded. With more fundraising plans, they’re aiming to reach their target of £250,000. They overcame storms, huge sea swells, sharks and everything else that comes with spending nine months at sea in a tiny boat.

You can find out more about Laura, Emma, Natalia, Izzy, Lizanne and Meg’s incredible journey at www.coxlesscrew.com

Data lack needs to change

How many people in England have been diagnosed with secondary, incurable breast cancer? The shocking answer is: nobody knows. Although it has been mandatory for hospital trusts to collect data on secondary breast cancer since 2013, no data has been published yet. And we know that hospitals may not even be recording how many people are diagnosed with the disease.

Without this information, hospitals will struggle to plan services or know how many specialist nurses they need.

You can help to change this by emailing your NHS trust to ask if they know how many people have been diagnosed with the disease in the past year.

To find out how to get involved – including a simple way to contact your hospital trust – visit www.breastcancercare.org.uk/secondary Help us to build on the work of our Bucket List campaign, launched last year, to make sure that everyone living with secondary breast cancer gets the care and support they need.

Could you put us in touch?

Many local businesses and workplaces offer fundraising support to charities, from a one-off event to year-long partnerships. intu Trafford Centre in Manchester has chosen Breast Cancer Care as its Fountain Fund partner. This means the charity will receive shoppers’ kindly donated spare change from the centre’s fountains for the next two years. It’s amounted to £1,500 in the first few months alone.

There are many similar opportunities out there, so if you know a local company who could be willing to support Breast Cancer Care, we’d be thrilled to hear from you.

Call Katy on 020 7960 3503 or email fundraising@breastcancercare.org.uk
Show you care with a Strawberry Tea

How can you do something special this summer and make a difference to the lives of people affected by breast cancer? The Strawberry Tea – Breast Cancer Care’s strawberry-tastic fundraiser – is the perfect excuse to get together with family and friends and enjoy the long summer days.

Every 10 minutes, someone is diagnosed with breast cancer in the UK, but the money you raise together with friends will help give them the support they need.

Sign up today for your free fundraising kit www.breastcancercare.org.uk/strawberry or call 0300 100 4442. And turn to page 22 to read about Lorna’s Strawberry Tea with friends and family.

Patients help improve information pack

Women with secondary breast cancer at The Christie NHS Foundation Trust in Manchester have helped to redesign the new edition of Breast Cancer Care’s Secondary breast cancer resource pack.

As a result, the new pack now has three sections:

• a loose-leaf section, dedicated to medical information including patient records sheets devised by the Christie group, plus diaries for recording energy and pain levels
• a booklet about living with secondary breast cancer featuring other people’s stories
• a short guide to difficult decisions and choices at the end of life – this is deliberately sectioned off so people can choose when and if it’s the right time for them to read it.

Order your free copy from www.breastcancercare.org.uk/publications

Step into summer

Are you looking for a day out to remember with friends and family this summer? Then look no further. The Pink Ribbonwalks are back in some of the UK’s most beautiful countryside as well as two cities. With 5, 10 and 20 mile routes to choose from, you can make miles of marvellous memories while helping Breast Cancer Care support women with breast cancer from day one.

Visit www.breastcancercare.org.uk/ribbonwalk
When your hair grows back after chemotherapy

Jasmin Julia Gupta – a specialist hairdresser, hair care expert and founder of hair loss support charity Cancer Hair Care – shares some tips for when your hair grows back after chemotherapy.

Over the last decade, I’ve personally given over 5,000 free hair care services to people before, during and after cancer treatment. I always say: You don’t need to give up on looking good. You just need some super tips that are right for you and your hair. Even if half of it is shorter than the rest, there’s always something we can do.

Don’t let hair drying weigh you down

You’re not alone if holding a heavy hairdryer causes your arm to feel stiff and uncomfortable. Many women tell me that after surgery, or if they have lymphoedema in the hand and arm, using a hairdryer can be a problem.

Try using a travel dryer – it’s around half as heavy as a regular dryer. Alternatively, place a plump pillow under your elbow and lean on a table for support.

For further support visit www.cancerhaircare.com or call 01438 311322

‘It can seem worrying to colour new hair, but with some good advice it can be an adventure’ Emma

Jasmin with Sara, who uses leave-in conditioner to help tame her curls
5 styling products for you

You’ll be amazed at how a little bit of product can create texture and calm unruly hair – even if it’s very short.

1. **Leave-in conditioner** is a great extra protective layer for dry hair. Most formulas are light enough that you can layer your styling products on top as well.

2. Use **hair oils** rather than serums. Hair will absorb essential and natural oils, whereas some serum-base products can sit on the hair, making it feel sticky and gooey.

3. **Soft mousse** is ideal for fine hair that’s static and for helping to tame new and longer lengths of hair. A stronger mousse may have a higher alcohol content or feel sticky and tacky, though, which can make your hair feel dry.

4. **Wax** is good for really unruly and hair. It’s strong and can help to mould and manipulate your style and hold it in place. It’s also good for controlling frizz and curls.

5. **Pomade** is lighter than wax and gives the hair a gentle sheen. It’s ideal to add to dry hair and will help define and add light texture into your style. It’s also great for taming frizz and dry ends. Great for new hair growth and finer hair types to get rid of static and add a gentle shine.

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**Colour**

As long as your hair and scalp are healthy, and you do a skin-sensitivity test for colour, there’s no specific length required to apply all-over colour to hair.

I’d recommend you allow at least an inch of hair to grow before colouring it, so you can be sure that the hair is of a good quality. For information and tips on colouring hair, visit our website cancerhaircare.com

**Scalp cooling – when to return to the hairdresser**

Some women have scalp cooling to try to prevent or reduce hair loss. It’s effectiveness varies, and if you do keep your hair it can be patchy or thinner. About six weeks after the last chemotherapy and scalp cooling treatment, a haircut to blend in the layers and snip off any dry and brittle ends can make a big difference.
Real lives

My scar reminds me I’m still here

Two years after she was diagnosed with breast cancer, Kim Smith reveals how her surgery affected her body image and relationship.

I was diagnosed with breast cancer just after my 34th birthday. All I heard was ‘cancer’, ‘mastectomy’, ‘chemotherapy’ and my head went into a spin.

I was so shocked I needed a mastectomy. My first thought was: ‘What does that look like?’ I remember looking at all this information and thinking: ‘No, I don’t like it’. It all looked so scary.

Looking back now I know a lot of it was out of date or looked worse than it was. A week after my surgery when they took the dressings off and I saw the scar for the first time, I thought ‘Oh – that looks fine.’ It was nothing like what I thought it was going to look like.

Showing my husband

It was only when I got back from hospital that I thought about my husband seeing my scar. That part just hadn’t hit me before then. I wasn’t happy with him seeing me at first, I would turn away when I was getting dressed. But I knew I was going to have to get used to it.

My husband was brilliant, he never said anything negative. He always wanted to give me cuddles and kisses, which helped me still feel like myself. When my hair started falling out he helped me shave my head. He was joking that he was repaying the favour for all the times I’ve done his!

We talked about anything and everything and he’d always let me vent if I needed to. He was with me every step of the way.

A silver lining

Losing my hair was the worst part for me. But when my hair grew back I got a pixie cut and dyed it platinum silver. I’ve always had long hair, I would never have cut it short and now I love it. I wish I’d done it years ago! With every problem you’ve got to look at the positives and go with those.

My scar is now a constant reminder of the tough times and the good stuff. Last year I shocked everyone I know by appearing topless in The Sun for Breast Cancer Awareness Month. The only person who’d seen me without my clothes on was my husband so I was really nervous, but it was such a good thing for me to do.

It took a lot of trauma to get where I am but my scar reminds me that I’m still here for my husband and three children.

To order a copy of Breast Cancer Care’s booklet Your body, intimacy and sex, visit www.breastcancercare.org.uk or call 0808 800 6000.
Dorothy Clark, from Surrey, was diagnosed with breast cancer at the age of 79. At 85, she took to the catwalk as a fashion show model.

The year 2010 was a significant one for me. I was turning 80 in October. I was planning to live life to the full, but things don’t always go according to plan.

In February, my husband and I were flying to Mauritius to board a cruise ship. I had a mammogram before going. I requested one as women over 70 are not routinely invited for breast screening. Imagine my shock when I returned home after the holiday to find three letters asking me to return immediately to the clinic for further tests.

It was bad news. A biopsy confirmed I had breast cancer. I thought that I was going to die – I was in the most dreadful state.

A terrible shock
The day of my mastectomy finally arrived. After careful thought, I decided not to have breast reconstruction. I was anxious to get on with my chemotherapy and radiotherapy. I have since got used to wearing a prosthesis.

I was determined to get better quickly after the surgery. I was Chair of Governors of a primary school and there was a big project I needed to support. I had arranged for the local MP to visit the school a few days after I left hospital. I met him with my surgical drains still in place!

My next challenge was chemotherapy. I was very anxious about having it. But the Breast Cancer Care website was brilliant at explaining everything. It helped reassure me and made things seem much less complicated than I had imagined.

The chemotherapy was still dreadful. My digestive system was upset, everything tasted horrible and I felt ill all the time. And losing my hair was a terrible shock. I started off with one wig but actually had five by the end.

The next treatment was radiotherapy – every weekday for six weeks. It was quite a commitment for my husband, then aged 87, who drove me 30 miles every day. But he was wonderfully supportive.

A fabulous experience
It’s now six years since I was diagnosed with breast cancer.

In 2015 I was a model at the Breast Cancer Care fashion show. Doing The Show was fabulous. From start to finish I felt like a superstar. It was an amazing atmosphere, and I was so privileged to meet so many inspirational ladies.

I also appeared on QVC, the TV shopping channel, to promote a necklace I designed for Breast Cancer Care.

Then in November I was awarded the MBE for services to education and the community in Surrey. It was the icing on the cake.

Breast Cancer Care has been a terrific support, and so has my family. We celebrated every stage of treatment. I want any older women diagnosed with breast cancer to know that they don’t have to give up. At 85 I have boundless energy and I’m travelling the world again with my husband.

Turn to page 24 to find out more about The Show 2016.
Our online friendship was a lifeline

Diane Crawford and Jane Cottingham met on Breast Cancer Care’s online Forum when they were both having treatment for breast cancer.

When Diane was diagnosed with triple negative breast cancer at 51, she turned to Breast Cancer Care’s online community for support. ‘I found their information booklets really useful – then I discovered the Forum,’ she says.

This was where Diane started chatting to Jane. ‘I was feeling a bit low, and she popped up.’

Jane had also recently been diagnosed with triple negative breast cancer, and her chemotherapy was due to start around the same time as Diane’s. ‘Diane has been a big part of my journey,’ says Jane, ‘especially through the chemo days, as anyone who hasn’t or isn’t going through the treatment doesn’t really understand how rough you really feel. But I did and so did Diane.

‘The more we chatted, the more we realised how many things we had in common. It was just such a comfort to know she was there. Just a simple message to say “Hi, how are you feeling?” – sometimes that’s all you needed.’

On the same wavelength

The pair became Facebook friends and started emailing each other too. ‘We were on the same wavelength and we bounced off one another,’ says Diane.

This friendship was an important source of support throughout their treatment. ‘Jane warned me about the emotional impact of hair loss, which made me feel prepared,’ says Diane.

Jane says: ‘We even sent each other photos when we lost our hair, and then with our wigs on. I think being so honest and open with each other has made life during this period a lot easier to cope with.’ Jane gave Diane her mobile number when she was having a particularly difficult time coping.

Despite living more than 250 miles apart – Diane lives in Prestatyn; Jane in Brighton – they watch films ‘together’ and have joint Weight Watchers weigh-ins every Tuesday morning.

Not alone

Diane and Jane hope to meet in person in the future. ‘I would love to meet up with Diane one day,’ says Jane. ‘I feel I have known her forever, and we have been through so much together – it would be just amazing.’

Talking to someone in the same situation gave Diane and Jane strength to get through treatment. ‘We would encourage each other every day that we would win the fight and that all the horrid stuff we were going through will be worth it in the end,’ Jane says.

Diane agrees, and encourages other people to look for support in the same way: ‘For the people out there, you’re not alone.’

As for her friendship with Jane, Diane couldn’t be more grateful. ‘We will definitely, definitely be lifelong friends.’

What is triple negative breast cancer?

Breast cancer cells are routinely tested for receptors that attach to the hormones oestrogen and progesterone, and a protein called HER2. When breast cancer tests negative for all three of these receptors, it’s known as triple negative breast cancer.

Share experience and find support on Breast Cancer Care’s online Forum forum.breastcancercare.org.uk
The second I came round I felt relieved

When Katie Mumford found out she had an altered BRCA2 gene – which increases her risk of breast and ovarian cancer – she decided that risk-reducing surgery was the right thing to do.

I'm really lucky. That may not be the normal way to describe a 27-year-old girl who has just had her breasts removed, but it's honestly how I feel.

When my BRCA2 mutation was diagnosed in 2014, I saw it as a blessing; it was a warning that enabled me to ultimately save my own life.

A ‘no-brainer’
Initial testing for the gene mutation took place after my mum was diagnosed with breast cancer at 48 and my older sister was diagnosed at just 28. This testing revealed that my mum, older sister, younger sister and I all have the BRCA2 gene mutation. I was told this meant I had around an 87% chance of developing breast cancer during my lifetime.

The decision to undergo a double mastectomy was an easy one for me. Seeing my mum and sister so ill from the disease, and knowing how many women die from breast cancer every year, made the decision a no-brainer for me. Being given the chance to make a positive decision was empowering.

I opted for skin- and nipple-saving mastectomies, which involved the removal of all of my breast tissue and the insertion of expander implants. I'm currently having monthly procedures to gradually fill the expanders and stretch my skin and muscle. I will then undergo a further operation to swap over the expanders for permanent silicone implants.

Immense relief
The second I came round from my operation, I felt immense relief that I no longer had a dangerously high risk of breast cancer. The knowledge that my decision may save my life kept me positive through my recovery and made all of the pain worth it.

Writing is my coping mechanism. I’ve put this to good use by writing a blog about my experience with the aim of helping other women in similar circumstances. I’ve worked hard to make the situation a positive one and part of that has involved raising money for cancer charities. I completed Tough Mudder – a military-style obstacle race – just eight weeks before my surgery as part of the Breast Cancer Care team. It was an extremely proud moment for me.

I’ve still got a little way to go, including another operation, until my reconstruction is complete. In a few years I’ll have to start thinking about my heightened ovarian cancer risk too.

But for now I’m living life to the full in the knowledge I have outsmarted my DNA.

Read Katie’s blog – My boobs are trying to kill me – at myboobsaretryingtokillme.blogspot.co.uk
Having treatment for breast cancer can make you feel that you aren’t on top of things. If you find you lose where you are on the page of a book, forget names and places or have trouble plucking the right words from your memory – you may have a side effect of treatment known as ‘chemo fog’ or ‘chemo brain’.

Following cancer treatment, some people find it difficult to concentrate or may feel more forgetful. While this is often called chemo brain or fog, some people with cancer will have changes to their memory and concentration even if they didn’t have chemotherapy. This is why healthcare professionals are more likely to call it cognitive impairment or cognitive dysfunction. This means that someone has difficulty remembering something or making decisions.

**What causes chemo brain?**

It isn’t known exactly what causes these changes to memory and concentration. Some experts think that cancer treatment may possibly have an effect on the normal ageing process. But cancer itself, the impact of a diagnosis and treatment, side effects such as fatigue (extreme tiredness which doesn’t go away with rest or sleep) and menopausal symptoms (caused by chemotherapy or hormone therapy) are also thought to play a part.

Anyone who has had cancer treatment may be affected by chemo brain, but it’s thought some people may be more likely to experience it than others. This includes people who are depressed (which can be common in people with cancer) and those who are older or less able to get up and about.

**What does it feel like?**

The symptoms of chemo brain vary from person to person and may be quite subtle. Some people find it hard to describe their symptoms as they may feel they are vague and hard to pin down.

You may have changes in your memory, concentration and ability to think clearly and put thoughts into action. You may be less organised than usual and less able to focus, or have trouble finding the right words, finishing sentences or losing your place while reading.

**5 things you can do**

If you feel you may be experiencing chemo brain, there are a few things you can do to try to help manage your symptoms and improve your wellbeing.

1. **Keep a diary**
   A diary can help you identify the times when you are at your best or when you have more difficulty concentrating or remembering things. Being aware of this can help you plan your day. You can write a list or put reminders in your phone of things you need to do.

2. **Learn to relax**
   Feeling stressed and anxious can affect your memory and concentration, and trying to reduce these using relaxation techniques may help. Try listening to music you find calming. Or you can practise deep breathing. Listening to a relaxation CD or using an app may also help you relax.

   Some people may find mindfulness useful. Mindfulness is about focusing on the present moment to try to reduce stress and improve your quality of life.
There are a few NHS cancer centres in the UK that offer mindfulness classes. Classes may also combine mindfulness with meditation, yoga and breathing techniques. Lots of people also practise mindfulness on their own. To get ideas about how to do this, there are lots of books and websites dedicated to mindfulness, as well as apps.

3. Keep your brain busy
Some people find puzzles like sudoku or crosswords help keep their brain active and challenged. There are also ‘brain training’ apps or computer games that can give your brain a workout and make you feel more on top of things.

4. Keep active and eat well
You may find that doing some physical activity helps to clear your head and focus better. This could be a walk, a cycle or swim – whatever you enjoy doing.
Try to eat a balanced diet and get plenty of rest and sleep. Being hungry or tired can make chemo brain worse.

5. Talk to your specialist team
Tell your specialist team about your symptoms, they may be able to refer you for help or give you information about local services, for example a counsellor or support group.

Chemo brain usually gets better over time after treatment has finished. Although not serious it can be a frustrating additional side effect when you’re trying to recover from breast cancer.

Talking to someone about a side effect like chemo brain can help you cope better with it. You can exchange tips on our online Forum forum.breastcancercare.org.uk or talk to one of our trained volunteers with an experience of breast cancer through our Someone Like Me service. Call 0345 077 1893 to find out more.
There's no set way for how you might feel after treatment for breast cancer, and no two people are the same.

Treatments for breast cancer may cause some pain while you’re having them or for some time afterwards. Most people can manage pain after surgery by taking regular pain relief and doing arm and shoulder exercises. But for some people, pain can be longer lasting, and this can have an effect on everyday life.

Pain soon after surgery

Immediately after surgery for breast cancer, and in the weeks that follow, you’ll probably experience pain and sensations such as burning and numbness in the scar area and under the arm.

If you’ve had reconstruction surgery, you may have some stiffness or soreness in and around the operation site for several weeks or months afterwards.

Taking regular pain relief, and continuing to do your post-operative exercises, can help to ease the area and reduce the pain.

As healing takes place and you get more movement in your shoulder, the pain and sensations should subside – and for most people this does happen within about three months.

Senior Clinical Nurse Specialist Rachel Rawson looks at ways to manage pain associated with breast surgery.

Breast Cancer Care’s Exercises after breast cancer surgery leaflet is designed to help you regain arm and shoulder movement after surgery for breast cancer. To order a copy visit breastcancercare.org.uk/publications or call 0808 800 6000.
Longer-lasting pain
However, for some people, nerve pain and sensitivity can carry on, and this can affect daily life in many different ways. It may interfere with your sleep or how you feel about your body, your ability to exercise or to find a comfortable bra, and intimacy with your partner.

Long-term pain is often associated with nerve damage, which happens during surgery to the underarm (also called the axilla). It occurs when the nerves supplying the skin have been damaged or stretched. People often describe this type of pain as shooting or burning, pressure sensations or numbness in the upper arm, chest area and under the arm.

Recent research suggests that pain is more common in people who have had their lymph nodes removed, rather than a sentinel lymph node biopsy, when only the first (sentinel) node or nodes are removed.

Simple pain relief, such as paracetamol or anti-inflammatory medication as tablets or gel, may help. But if the pain is not controlled and is affecting day-to-day life, you’ll need to let your hospital team or GP know. They can fully assess your symptoms and may prescribe alternative treatments, such as antidepressants or anti-epileptic drugs, both of which have been shown to help with nerve pain associated with surgery.

Cording
People who report cording often have pain and limited shoulder movement, and can feel tight ‘cords’ of tissue stretching from under the arm and down the inside of the arm, sometimes as far as the wrist. You’ll find that doing your post-operative arm and shoulder exercises is very difficult.

Cording is thought to happen when there’s disruption to the lymph and blood vessels when lymph nodes are surgically removed from under the arm.

Stretching the cord can improve the symptoms, though you may need physiotherapy to help with this. Cording does improve over time and usually gets better within three months. Some people develop cording more than once.

Let your breast care nurse know if you think you have developed cording so they can refer you to the physiotherapist.

Phantom breast sensations and pain
Phantom breast pain or breast sensations can develop after a mastectomy.

Phantom breast sensations are usually not painful, but it can feel as if your breast is still there.

Some people will also have a feeling of pain, and this is known as phantom breast pain. The symptoms of phantom breast pain can be felt as pain in the area where the nipple was, or can involve the whole area where the breast was removed. For some people, phantom breast pain can last for years after the operation.

Phantom breast pain is related to nerve damage at the time of surgery. Because of this, the most effective types of pain relief are those used to treat nerve pain.

If you experience phantom breast pain and simple pain relief doesn’t help, talk to your GP or hospital team.
Q: I’ve just had surgery for breast cancer and I’m about to start a hormone therapy drug called anastrozole. My specialist has recommended I have a bone density scan. Why do I need this?

A: Anastrozole belongs to a group of drugs called aromatase inhibitors (AIs). AIs are used to treat women with breast cancer who have gone through the menopause (post-menopausal). They are sometimes given to pre-menopausal women with breast cancer alongside treatment to stop the ovaries from working.

These drugs reduce the amount of oestrogen circulating in the body, which can reduce bone density and over time can cause osteoporosis. Osteoporosis is a condition where your bones lose their strength and become fragile. This means they are more likely to break.

The likelihood of developing osteoporosis while taking AIs also depends on how healthy your bones were before your breast cancer treatment and whether you have any other risk factors for developing osteoporosis. National guidelines recommend women with breast cancer have a bone density scan when starting an AI. Some women may be recommended to have more bone density scans about every two years while on treatment.

A bone density scan – also called a DEXA or DXA scan – measures bone mineral density (BMD). BMD is the amount of calcium and other minerals in an area of bone and is a measurement of bone strength. The lower your BMD, the more likely osteoporosis will be diagnosed.

A DEXA scan uses a very small amount of radiation, and is quick and painless. While you’re lying down, an x-ray scanner will pass over your body taking pictures of your lower spine and hips.

You may find it useful to read our booklets Anastrozole (Arimidex) and Osteoporosis and breast cancer treatment. The National Osteoporosis Society provides information about osteoporosis, healthy living and diet on its website www.nos.org.uk

Q: My periods stopped while I was having chemotherapy and I’m not having any other treatment. When can I expect them to return? I’m 37 years old.

A: Women who have not yet reached the menopause often find their periods stop or become irregular during chemotherapy. Chemotherapy drugs aim to destroy cancer cells, but also affect the functioning of the ovaries which can affect your periods.

Whether your periods return will depend on the type of drugs used, the dose you’re given and your age. The younger women are, the more likely their periods will return after chemotherapy, especially if they’re under 35. At the age of 37, your periods may return. Some women’s periods come back fairly soon after chemotherapy, but they can return up to two years after. Even if your periods do return, you’re likely to go through the menopause up to 5–10 years earlier than you would have done if you hadn’t had chemotherapy. Although your periods have stopped, it’s still possible to become pregnant so use contraception if you want to avoid pregnancy.

Some women have menopausal symptoms if their periods stop during chemotherapy. These can include hot flushes, night sweats and vaginal dryness. Our Menopausal symptoms and breast cancer booklet has information on coping with these. Our Younger women with breast cancer booklet has information about being diagnosed with breast cancer at a young age.

Breast Cancer Care’s online Forum (forum.breastcancercare.org.uk) has several posts where people talk about their periods returning following chemotherapy. You can use the search function to find them.

You may also be interested in attending a Younger Women Together event. These free two-day residential courses, held across the UK, bring together younger women with breast cancer to learn, ask questions and share experiences. Call 0808 800 6000 to find out more or check our website www.breastcancercare.org.uk
Q I have secondary breast cancer in my bones and have been told there’s a risk of spinal cord compression. Can you tell me more about this?

A The spinal cord, along with the brain, makes up the central nervous system. The spinal cord is a long bundle of nerves that stretches from the brain to the lower part of the back. The nerves extend out to other parts of the body such as organs and limbs. The bones of the spine (vertebrae) surround and protect the spinal cord.

Spinal cord compression happens when there is pressure on the spinal cord. This can happen if someone has breast cancer that has spread to the bones of the spine. It’s known as malignant spinal cord compression (MSCC). It’s important for anyone who has secondary cancer in the bones of the spine, or who’s at risk from it, to be aware of the symptoms of spinal cord compression and report them immediately. This can be to their GP, a doctor or nurse in their specialist team or the local accident and emergency department. This is because the earlier MSCC is treated the more effective the treatment will be. If it’s not diagnosed and treated, long-lasting complications can develop.

Symptoms of MSCC include:
- severe pain in the neck or spine, especially if different from any other pain you have experienced
- tenderness over the spine in the area affected
- changed sensation such as pins and needles or weakness in the legs or arms
- loss of control of the bladder and/or bowels.

These symptoms may happen for a number of different reasons and won’t necessarily be spinal cord compression, but it’s important to get them checked out.

If doctors suspect MSCC they will request an MRI scan to check the spine and spinal cord. Treatment for spinal cord compression may include radiotherapy, steroids, bisphosphonates (bone-strengthening treatments) and pain relief.

We have produced a small alert card for patients and healthcare professionals about spinal cord compression with information about the symptoms to be aware of. It’s included in our Secondary breast cancer resource pack.
Reconstruction: your stories

The choice of whether to have breast reconstruction is a very personal one. Three women talk about their decision.

‘I didn’t want to go through more surgery’

Suzi Snow, from Reading, was diagnosed with breast cancer in July 2006. She had a mastectomy and lymph node removal, and chose not to have reconstruction.

I was given information about reconstruction, but I was told I could not have immediate reconstruction. I was having radiotherapy and my surgeon recommended I wait at least a year, maybe even 18 months, before I could consider doing it.

I chose not to have reconstruction. I didn’t feel that I wanted to go through more surgery after all that time. I did think I may change my mind, but by the time it was an option I was used to wearing a prosthesis. I really didn’t need a breast, and to me it’s normal now to just have the one.

I have a collection of prostheses for different occasions. I have learnt over the years that you do need different ones for different reasons, for example if you’re doing sport or to go with different clothes and underwear.

I’ve never regretted my decision. I was given information about reconstruction, but I was told I could not have immediate reconstruction. I was having radiotherapy and my surgeon recommended I wait at least a year, maybe even 18 months, before I could consider doing it.

I chose not to have reconstruction. I didn’t feel that I wanted to go through more surgery after all that time. I did think I may change my mind, but by the time it was an option I was used to wearing a prosthesis. I really didn’t need a breast, and to me it’s normal now to just have the one.

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I’ve never regretted my decision. Maybe if they had offered me an immediate reconstruction I may have thought differently, but I’m not even sure I would have.

I’ve always said if people can deal with losing limbs for whatever reason, then I can live without a breast. I’m still the same woman as I was before and I certainly do not feel any less of one.

‘I’m delighted with my reconstruction’

Lynn Abel, who lives in Cardiff, had a mastectomy in 2001, and chose to have delayed reconstruction years later.

I was offered reconstruction at the same time as the mastectomy, but life was too busy and I did not want to wait a few more weeks for the plastic surgeon. I was told I could have reconstruction at a later date, but I was so sure I would not want it.

One friend said ‘You will miss your cleavage’, but I did not realise how much. I wore a prosthesis for years, but I always felt insecure and unbalanced.

It was several years before I started to think about a reconstruction. I was very conscious of the dent above where my left breast used to be. I gave away all my dresses, blouses and tops because I felt scared of people seeing it. I loved swimming but was so worried my prosthesis would show. Buying clothes was a nightmare – all special occasion-wear was low-necked.
My daughter’s wedding was the catalyst that made me decide to go for the reconstruction. It took a while to go through the system and was two years before I had a tram flap reconstruction [using tissue taken from the lower abdomen]. All through, I was given detailed advice and the opportunity to talk about it. The whole process for me took a long time – it was nine years after my mastectomy – but it was the right time for me.

I’m happy with the decisions I made and when I made them. I can wear the clothes I want and have the freedom to move without worrying if my prosthesis is showing. I am delighted with my new breast and very thankful to the surgeon and staff for doing it.

Margaret Reid, who lives in Livingston, West Lothian, was diagnosed with breast cancer in 1988. She later had a bilateral mastectomy without reconstruction.

There were a number of reasons why I chose not to have reconstruction when I was offered it. But mainly I felt I didn’t need breasts to make me who I am. I have got two prostheses, but about 80% of the time I don’t wear them. The only time I do is when my husband and I go out together as a couple.

But I’m very comfortable without a prosthesis. Sometimes people do look at me, but I don’t mind. Once I was in a restaurant and I noticed a man was obviously staring. I shouted over: ‘It’s OK, they’re at home in a box!’

I use humour to deal with situations like that. At a Breast Cancer Care fundraising event in Scotland, I got my prosthesis signed by Gary Barlow, Chris Evans, James May and Brian Cox – the Fab Four! I’m going to auction it for charity.

I’m very happy with the decision I made not to have reconstruction. The most important thing is not what other people see, but how you feel inside.

To order a copy of the booklets Breast reconstruction and Breast prostheses, bras and clothes after surgery, go to www.breastcancercare.org.uk or call 0808 800 6000.
Financial support

Get the financial support you need

Financial issues can be a source of worry when you have cancer, but you may be able to claim benefits to help.

For many people, being diagnosed with breast cancer can have a financial impact.
Perhaps you’ve had to take time off work, reduce your hours or stop working altogether. The cost of travelling to and from hospital can add up; more time at home can lead to increased fuel bills; and you may have childcare costs on top of this.

Claiming benefits

Being diagnosed with cancer may mean you become eligible for certain benefits.
Many people with breast cancer don’t claim benefits. This might be because they don’t know what they’re entitled to, or they’re embarrassed to ask for help.

There are different types of benefits, and each has its own rules about who can apply. For example, some benefits could help if you’ve had to stop working, or work less, because of cancer. Other benefits may be helpful if the effects of your cancer mean you have care or mobility needs.

It’s important to apply for any benefits as soon as you feel able to, as most benefits can’t be backdated.

Secondary breast cancer

If you’re living with secondary breast cancer (when cancer cells from the breast have spread to other parts of the body), financial help in the form of benefits could help with some of the extra costs caused by your illness.

3 places to get support and information now

The benefits system is complex and can be confusing. It’s a good idea to get expert help and information to find out what you may be eligible for.

1 Macmillan Cancer Support has a network of financial specialists, who can provide information and help with filling out forms. Call 0808 808 00 00 or visit www.macmillan.org.uk
2 Citizens Advice can help you find out what financial support you’re entitled to. Visit www.citizensadvice.org.uk for information on benefits and to search for your local Citizens Advice.
3 You can find out about individual benefits and how to claim on the GOV.UK website. Visit www.gov.uk

Some people with secondary breast cancer may be able to claim certain benefits – including Personal Independence Payment (PIP) and Attendance Allowance – more easily and quickly under a special fast-track rule. You can talk to your GP, nurse or social worker about what you may be entitled to. You can also get help from a specialist welfare officer in your palliative care team if you have one.

‘We advise everyone who comes to us for support to have a benefits review,’ says Alison Hall, from Macmillan Information and Support Centre in Nottingham. ‘There are often benefits and credits that can be obtained and outgoings that can be reduced. A simple claim for benefits such as Personal Independence Payment, Employment and Support Allowance or council tax benefit can make a big difference to someone’s financial situation and improve their quality of life.’

Breast Cancer Care’s Living with Secondary Breast Cancer meet-ups include an information session with an expert adviser. They will talk through the most relevant benefits and the eligibility criteria, and give you plenty of opportunity to ask questions. You’ll also be told how you can access support to help you make any relevant claims.

To find out more about Living with Secondary Breast Cancer, call 0345 077 1893 or visit breastcancercare.org.uk/services

Free NHS prescriptions

People with cancer don’t have to pay for their prescriptions on the NHS. Ask your GP for an exemption certificate, which entitles you to free prescriptions if you’re having treatment for cancer, the effects of cancer, or the effects of current or previous cancer treatment. The certificate lasts for five years, after which it can be reviewed.
Every year, competitors from the world over arrive in the Scottish Highlands village of Carrbridge to take part in the quest for porridge world championship glory. This event is called The Golden Spurtle (a spurtle is a porridge-stirring stick). This recipe won the speciality trophy in 2014.

Serves 4
- 75g mix of medium-grade oatmeal and pinhead oatmeal
- 75g mix of porridge oat flakes and jumbo oat flakes
- 450ml Guernsey or nonhomogenised milk, or a mixture of milk and water
- Pinch of ground cinnamon (to taste)
- 1 tablespoon apple powder, or (as it’s not easy to find) dehydrate some fresh apple and grind
- A handful of freshly chopped dates
- A handful of freshly chopped dried apple, either from rings or as cubes, with or without skin
- A handful of freshly chopped dried apricots

To serve
- Guernsey cream, or raw, or clotted
- Coconut palm sugar (optional)

Combine the oatmeal and the oat flakes mixtures.

Heat the milk, or milk and water, in your favourite porridge pan. Add the oatmeal and flakes, and start to stir with your spurtle. Now add the cinnamon and apple powder, and most of the chopped fruits – save some to sprinkle on the top of each bowl.

Simmer for as long as necessary until just right – usually about 4–6 minutes. Add some extra milk, or water and milk, if the porridge becomes too thick. It should be thick and creamy but pourable.

Serve, sprinkling some of the reserved dried fruits on top, before pouring over, generously, as much cream as you like.

Sweeten some more, if you wish, with a shaking of coconut palm sugar.

Or, if you want to appreciate the cream cold with the hot porridge, serve the cream on the side in its own bowl. Dip your spoon into the hot porridge and then into the cream, hot and cold, cream and oats... a heavenly combination.

This recipe is taken from Eat Right by Nick Barnard, co-founder of Rude Health (Kyle Books 2016, £25).
‘Strawberry Teas — they are well worth it!’

Breast Cancer Care’s lovely summery strawberry-tastic fundraiser is the perfect excuse to get together with loved ones. And the money you raise could help someone through one of the biggest challenges they’ll ever face.

Lorna Skyer, from Herefordshire, held her Strawberry Tea to celebrate with friends and family following her breast cancer treatment.

‘When The Strawberry Tea popped up on Facebook we thought it would be a nice idea for fun in the sun! After a tough year of surgery, gruelling chemo and radiotherapy last year, then getting the all clear in May, it was a way of celebrating with friends and family.

‘The day was fantastic; lots of friends, family, neighbours and friends of friends turned up and we all had a great time. Some of my friends from Weight Watchers came too, so I hope that didn’t have any adverse effects on them the following week! ’It was really nice that old friends I haven’t seen for ages surprised me and stopped by too. It was a really lovely day.

‘I would say to anyone thinking of having a Strawberry Tea, have a go! You can make it as large or small as you want, with just a few friends or invite the whole neighbourhood if you like. People make the effort so I think they are well worth it.’

You can hold your own Strawberry Tea in June, July or August. It’s a lovely way to show you care.

Sign up today for your free strawberry-tastic fundraising kit and help support people like Lorna
www.breastcancercare.org.uk/strawberry
or call 0300 100 4442
Thank you to all Vita readers who supported us by buying Mother’s Day gifts with a difference through www.buyitwithlove.com.

Brands including PhotoBox, BHS, Linzi Shoes, Bourjois, Red Letter Days, Spabreaks.com and Crabtree & Evelyn got involved by donating money to Breast Cancer Care for every gift sold during the month-long period. The money raised will help us continue to support people affected by breast cancer from day one. We look forward to next year!

Celebrating special memories with PhotoBox

Mums give us some of our most special memories. To celebrate Buy it with Love, our friends at PhotoBox ran a competition. They asked people to share their favourite photo of their mum – or mums to share a photo of themselves with their children – for the chance to win some amazing PhotoBox goodies.

There were lots of wonderful entries, with people sharing special memories like their wedding day or milestones such as their last day of chemotherapy. You can see the winning photos here.

PhotoBox will be raising £25,000 for Breast Cancer Care throughout 2016, and will be running another campaign later in the year. So keep an eye out for future opportunities to win some PhotoBox goodies.
The Breast Cancer Care Show is our fashion show event held in London, Glasgow and Cardiff. Over the last year, they’ve together raised nearly £700,000. So a huge thank you to everyone who helped make this happen.

Celebrate with us
We’d love you to join us. And this year is extra special, as we celebrate the 20th London Show. Whether in London, Scotland or Wales, join us for an unforgettable time.

The Show Scotland
22 September 2016
The Show London
2 November 2016
The Show Wales
March 2017

Visit breastcancercare.org.uk/theshow for more information or to book tickets.

From the fashion to the fundraising, fine food to first-class entertainment, these events bring together friends, family and colleagues to raise money for people affected by breast cancer. The Show has an inspirational and vibrant atmosphere and is supported by our celebrity ambassadors and patrons.

The heart of The Show
The Show celebrates the strength and courage of the extraordinary men and women taking to the catwalk with confidence following a breast cancer diagnosis. Our models show that you can look fabulous, feel amazing and achieve great things! Dorothy, one of the 2015 London models, tells her story on page 9.

Calendar of events

May
2  Virgin Money London Marathon ballot opens
14  Tough Mudder Half, Midlands (Leicestershire)
14  Pink Ribbonwalk Blenheim Palace, Oxfordshire
21  Pink Ribbonwalk Polesden Lacey, Surrey
21–22  Tough Mudder, Midlands
22  Velothon Wales
28  Women V Cancer Ride The Night
28–29  London to Brighton Challenge
30  BUPA London 10,000

June
1 June
30  BUPA London 10,000

July
9  Pink Ribbonwalk London at Night

‘Absolutely fantastic, inspiring and great fun.’ 2015 guest
Helping you face breast cancer

Moving Forward courses
Looking at issues you may face after treatment, our short courses provide support and information on adjusting to life after a cancer diagnosis. Run in partnership with the NHS, courses take place across the UK.

England
• Ashford • Barnsley • Basingstoke
• Birmingham • Bolton • Bournemouth
• Canterbury • Chelmsford • Doncaster
• Greater London • Grimsby
• Huddersfield • Liverpool • Maidstone
• Margate • Middlesbrough
• Nottingham • Oldham • Oxford
• Poole • Salford • Scunthorpe • Sheffield
• Stockport • Stockton-on-Tees
• Southampton • Southend
• Tunbridge Wells • Warwick
• Winchester • Worthing
• Wythenshawe

Scotland
• Dundee • Edinburgh • Fife
• Forth Valley • Glasgow • Lanarkshire
• Livingston • Perth

Wales
• Bangor • Bridgend • Cardiff
• Haverfordwest • Llanelli • Llantrisant
• Neath Port Talbot • Newport
• Rhyl • Swansea

Email movingforward@breastcancer.org.uk to find out more about any of our Moving Forward services, or give us a call.

Someone Like Me
For people who’ve been affected by primary breast cancer, people with a confirmed genetic diagnosis/going through genetic testing, their partners, family and friends. Someone Like Me puts you in touch with someone who’s been there – someone who has more in common with you and understands your particular concerns. Email someoneilikeme@breastcancer.org.uk to find out more.

Younger Women Together
Two days of information, support and sharing. Come to a Younger Women Together event and meet around 30 other women under 45 who’ve been diagnosed with primary breast cancer. All food and accommodation provided free. Email youngerwomen@breastcancer.org.uk to find out more.
• London, 10/11 June
• Leeds, 23/24 September
• Bristol, 4/5 November

To find out more
Call our friendly Services team for more information about the support we offer on
0345 077 1893

Living with Secondary Breast Cancer
Regular meet-ups for people living with secondary breast cancer. With expert guest speakers.
• Bristol • Cardiff • Cornwall • Coventry
• Derby • Dorset • Edinburgh
• Forth Valley • Glasgow • Halifax/Huddersfield • Lanarkshire • Leeds
• Liverpool • Manchester • Maidstone & Tunbridge Wells • Milton Keynes
• North London/Hertfordshire • Oxford
• Romford • Salisbury • Sheffield
• Sutton/South London
• York/Harrogate

Email secondaryservices@breastcancer.org.uk to find out more.

There are also one-off information days for people with secondary breast cancer in central London every three months.

Lingerie Evenings
Practical information and support on what to look for in a bra.
• Cardiff
• Llandudno
• Haverfordwest
Anita Care
Offering post-surgical ladies innovative and discreet breast forms alongside specially designed, beautiful lingerie and swimwear, which allows wearers to feel comfortable and confident in all areas of their life, without compromising on colour, style and luxury. For all enquiries please call 020 8446 7478 or visit www.anita.com

Banbury Postiche
offers a fantastic range of acrylic wigs with a next day delivery service available. We have a Customer Care team to support you, whatever your needs. Our purely wigs range is guaranteed to have a style to suit and delight you. Please take a look at our website www.wigsuk.com or call 01295 757 408.

Betty and Belle
Winner of ‘Best lingerie shop in the UK’ award. Exquisite lingerie and specialist bra fitting shop with an extensive range of bras and swimwear to suit mastectomy, lumpectomy and reconstructions. Bra alteration and pocketing service. Visit www.bettyandbelle.co.uk or call in at 35 Oxford Rd, Cheshire WA14 2ED; 0161 929 1472.

Eden Prosthesis
From £35, specialising in breast prostheses for ladies who have undergone a mastectomy. Our breast prostheses are silicone and can simply slot into a pocketed bra. Comfortable and natural to wear, giving you confidence. Competitive prices without compromising quality. Contact Carol: 07876 433 935 or visit www.edenprosthesis.co.uk

Nicola Jane
Experts in post-surgery fashion since 1984. Our NEW collection for 2016 features beautiful bras and stunning swimwear that will help restore your confidence after surgery. All with fitted pockets to hold your prosthesis securely. Free returns and shops throughout the UK. Call 0845 265 7595 or visit www.nicolajane.com

PEBBLE UK
Over 90 designs of seam-free compression arm sleeves with matching gauntlets or gloves, specifically designed for lymphoedema (swelling). Made with moisture-wicking fibres, unscented aloe vera treatment for skin-friendly softness and fine-knit construction for a lightweight feel. Available in three sizes, two lengths and two compressions. 0800 433 4757, www.pebbleuk.com

Silima FOR YOU!
Our 2016/17 catalogue brings you stylish and supportive lingerie. Please check out our value-for-money range of everyday bras from £17.95 each (Diana and Victoria) or treat yourself to our French design heritage with Amelie or Suzanne, the latest addition to our range. Look no further for fashion and femininity! Call 01295 220 524 or visit www.conturabelle.co.uk

Sowomen’s headwear can help you manage your hair loss with confidence; our hats, turbans and scarves are made using soft, breathable fabric making them lightweight and easy to wear. ‘I believe that good headwear can really help women coping with hair loss to feel stylish, comfortable and confident’ says Carine, founder of Sowomen. For any questions, please contact carine@sowomen.co.uk or visit www.sowomen.co.uk

Suburban Turban
offers stylish, fashionable headwear and accessories for women experiencing hair loss. The collection offers styles for all occasions – from beautifully simple, super-soft jersey hats to chic berets and sparkling cocktail hats. We also offer a range of natural skincare products, chosen for their gentle, soothing benefits. To shop the range go to www.suburbanturban.co.uk or call 01306 640 123.
**TenderCush** offers comfort and support following breast cancer surgery. Whether you’re sleeping, travelling, around the home or socialising, our products are specially designed to help. Our fabulous patented Shoulder Bag is a truly liberating product which offers support when out and about. Available now at www.tendercush.co.uk or call 07980 470 072. Also on Facebook and Twitter.

**Trulife** breast forms and accessories restore confidence, self-esteem and ultimately contribute to a better quality of life for women following breast surgery. With over 50 years of experience in breastcare, we lead through innovation and offer the most natural, coolest and softest breast forms available. Call 0800 716770 or to see our range visit www.trulifebreastcare.com

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**Make today the day you get involved**

Whether it’s minutes or months, your time is valuable and we couldn’t do what we do without you. Feel amazing and make today the day you volunteer – there’s no time like the present and donating yours could make all the difference. Why not look for something right now? We’d love to meet you!

www.breastcancercare.org.uk/volunteer

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To advertise here please email us at vita@breastcancercare.org.uk
If you have already sent us this form, you will continue to receive Vita four times per year. Breast Cancer Care volunteers will be sent Vita automatically. We will not pass your details on to any third parties. If you are a member of a support group or a healthcare professional and would like multiple copies, please call 0345 092 0808.

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Postcode

To receive future issues of Vita call us on 0345 092 0808, email vita@breastcancercare.org.uk or cut off this slip, fill in your details and return it in an envelope to our freepost address: Breast Cancer Care, RRKZ-ARZY-YCKG, 5-13 Great Suffolk Street, London SE1 0NS.