I realise how far I’ve come

Four years after my breast cancer diagnosis
Wear pink, raise money and help make life-saving research and life-changing support happen

18.10.19

We believe, that if we all act now, by 2050 everybody who develops breast cancer will live, and live well. Help us get there.

Register today for your fundraising pack

wearitpink.org/vita
There are few things less predictable than the great British summer. But one thing you can rely on is that Vita magazine will bring you inspiring and honest real-life stories from people living with or beyond breast cancer.

As editor, I’m always grateful to anyone who shares their story on our pages. It’s not always easy to talk about a cancer diagnosis and the lasting effects it can have on your life. But I know how important it is for people who’ve been affected by breast cancer to know that they’re not alone and there are people out there who’ve been through a similar experience.

On page 6, you can read Beverley’s story. When Beverley was diagnosed with breast cancer, she saw her whole future falling away in front of her. But now, four years later, she’s looking forward to taking to the catwalk at the amazing Show London.

Elsewhere in this issue we have our first in a new series of articles about the latest breast cancer research.

It’s very common to worry about recurrence, the term used for when breast cancer comes back after treatment. However, for some women the fear is so great that it disrupts their quality of life. On page 18, we explore a new study that’s hoping to help reduce women’s fears of their breast cancer returning.

Gareth Fletcher
Editor
vita@breastcancercare.org.uk
Dear Vita

Seventeen years ago was my first breast cancer experience. The magazine at the time was Amoena. I loved this mag and made wonderful friends through it.

March of this year I had breast cancer in the other breast. Your magazine came in the post today. I love it. I totally agree about the diary page [Dear diary... issue 38 spring 2019]. I started writing 17 years ago and am now adding to it.

It would be good to have a ‘pen pal’ page. I’ve made some lifelong friends who I would never have known or met if not for the breast cancer mags.

Elaine

Vita says...

You’ve highlighted a great point. Elaine, which is that contacting other people who’ve been through a similar experience can make all the difference when you’ve had breast cancer. Whether it’s through the online Forum, Someone Like Me service or at a face-to-face event, Breast Cancer Care offers many ways for people to connect.

Dear Vita

I was diagnosed with womb cancer in January 2018.

While I was waiting to see the counsellor, I spotted Vita magazine and took a copy home, which I have enjoyed reading.

Cancer is cancer, no matter which one you have had. Although Vita magazine is for those who have breast cancer, I feel it has helped me.

P Dallinson

Dear Vita

I’ve been receiving your excellent magazine by post for several years now, and I’m pleased to say that my condition is now stable and my mental health massively improved.

Thanks for all your support – keep on making a difference.

Jenny

What’s on your mind?

Email vita@breastcancercare.org.uk
Write Fifth Floor, Ibex House, 42–47 Minories, London EC3N 1DY
News

After treatment: new booklet explains all

What happens after hospital treatment for breast cancer comes to an end? How often should I have follow-up mammograms? Who can I talk to if I have any concerns?

These questions and more are answered in the revised and updated booklet *After breast cancer treatment: what now?*

The booklet also includes a two-page guide to being breast and body aware after treatment, and what signs and symptoms to look out for.

To order a copy, visit breastcancercare.org.uk/publications or call the Helpline on 0808 800 6000.

Research: encouraging tamoxifen use

A study, funded by Breast Cancer Now, has looked at using an educational tool to encourage women to continue taking tamoxifen for the full duration prescribed.

The hormone therapy drug is commonly prescribed for up to 10 years. But it can cause side effects such as menopausal symptoms, and up to half of women don’t take it for the full duration. Stopping early might negatively affect their outcome.

A tool was created, in the form of an information pack, to address this issue and showed some positive results when it was tested in a group of women. The researchers recommend it be assessed in a larger trial.

If you’re finding it hard to cope with side effects of hormone therapy, you can call the Breast Cancer Care Helpline on 0808 800 6000. You can also order a copy of our booklets *Tamoxifen* and *Menopausal symptoms and breast cancer*.

Save the date!

Our researchers will be at the British Science Festival, at the University of Warwick, on 10 September 2019 to discuss the latest developments in breast cancer research. To book your free tickets for the ‘Breast cancer breakthroughs’ event, go to britishsciencefestival.org
I realise how far I’ve come

Beverley Nash tells us how she coped in the days after her diagnosis, and why she wishes the people who supported her had known support was available to them too.

Beverley felt numb when she learnt that the puckering on her left breast, which she’d noticed a month earlier, was cancer.

‘I remember the consultant talking, all these words coming at me, but I just couldn’t take it in,’ recalls Beverley, 54, who was diagnosed in July 2015.

‘He never used the words “breast cancer”, he just kept referring to a tumour and saying not to worry as they were going to deal with it.’

Beverley’s first thought was that she was going to die.

‘I just saw the whole of my future crumbling away, and it was devastating,’ she says.

Many tears

Four years on, Beverley says the hardest time was immediately after diagnosis – the weeks of waiting before treatment began.

‘I never knew it was possible to cry so many tears,’ she says. ‘I felt like I was on an out-of-control speedboat and all I could do was hang on.’

By the time the date of her lumpectomy came round – the day after her 51st birthday – Beverley was starting to feel calmer and more positive. ‘I think that was because it was the first major step towards getting rid of the cancer,’ she says.

‘It felt like a much stronger, braver person had come along and taken over my body. But I now realise it was just me finding strength I never knew I had.’

Losing anonymity

After surgery, Beverley was advised to have chemotherapy.

‘I was terrified,’ she says. ‘My legs almost froze as I approached the doors of the chemo unit.

‘I was very fearful of how this treatment was going to make me feel, but apart from increasing fatigue I fared much better than I could have imagined.’

Another challenge was dealing with physical changes that would make her cancer obvious to everyone.

‘I was going to lose my anonymity,’ she says. ‘Up until that point, the world wouldn’t have known what I was going through. But I was going to lose my hair and look like a cancer patient.’

‘Going out into the world in my hats and then with no eyebrows or lashes was a huge challenge,’ she says. ‘But, once done, it was much easier than I thought it would be.’

Support for supporters

Throughout treatment, Beverley was supported by her husband, sister and dad, while her mum and closest friends also provided fantastic support.

While their support was invaluable, Beverley feels they themselves might have benefited from additional help.

‘My loved ones and I didn’t talk about how they might be feeling when we were all in the thick of it,’ she says.

‘I know my husband occasionally spoke with a trusted friend and with my dad and sister, who I’m very close with, but they kept their
fears from me.
‘In fact, we haven’t spoken about it until now. Talking with them has certainly helped my understanding of how my diagnosis affected them.’

Beverley thinks it’s important people know that Breast Cancer Care supports loved ones and friends, as well as the person with breast cancer.
‘It didn’t occur to any of them, or to me, that they could pick up the phone to the Breast Cancer Care Helpline,’ she says.

Behind me now
In March 2016, Beverley’s hospital treatment came to an end as she finished the last of 15 sessions of radiotherapy.
‘I didn’t feel any elation when treatment ended,’ she says. ‘There was definitely a sense of feeling lost and not ready for the next phase.
‘I felt like I’d been kicked out of the nest and didn’t yet know how to fly.’

When a Moving Forward course was recommended to her, Beverley almost didn’t go.
‘My husband encouraged me to go and I am so glad I did,’ she says. ‘It was such a relief to meet other women in the same situation – all pointing to their chemo curls and saying, “Do you know how to handle this?!”’

One of the biggest challenges since treatment ended has been dealing with the fear that the cancer might come back.
‘I no longer worry about every tiny ache and pain,’ says Beverley, ‘but I don’t think the fear of recurrence will ever completely leave me. But that’s OK.
‘My diagnosis is behind me now as part of my history and, for the most part, it stays there.’

I’ve come so far
This year, Beverley has been chosen as a model in The Show, Breast Cancer Care’s annual fundraising fashion show.

‘I feel really honoured to have been selected because Breast Cancer Care did such important work in supporting me.
‘It’s wonderful to be able to give something back,’ says Beverley, who is now also a Moving Forward volunteer.
‘I saw The Show from the audience last year so I know what an absolutely amazing day it is.
‘I’ve come a long way since the time I sat in the bath and cut all my hair off the day it started falling out.
‘It feels like the blink of an eye, but I realise how far I’ve come.
‘I hope when they see me on the catwalk, my family and friends will realise how much they were part of that.’

Moving Forward courses can help you adjust to life after breast cancer treatment. For more information, call 0808 800 6000 or visit breastcancercare.org.uk
Finding activewear that’s comfortable, supportive and practical is key. If you don’t feel happy about your choices, you won’t want to wear them and you won’t want to exercise.

Many places now stock affordable activewear, from supermarkets to high-street shops and online stores. So it shouldn’t be hard to find something you love and that you feel like putting it on.

**Yoga can really help with flexibility, fatigue and overall wellbeing.**

Yoga-wear tends to be very relaxed. T-shirts, capris or leggings are all good options.

For slower classes or when you’re just beginning, you may want to wear comfortable leggings and a T-shirt with a long-line vest top underneath for an extra layer of warmth.

If you’re practising a more physical form of yoga, wear clothing that sits close to the skin and that will wick away any sweat.

**Activewear that’s right for you**

Whatever type of exercise you do, having the right clothing can make all the difference, says Rachel Rawson.

**Strike a pose**

Yoga tee
£14, Next
next.co.uk

Technical capri leggings
£20, Next
next.co.uk
Walk, jog, run

Finding comfortable shoes is important for most exercise, even if it’s walking to the shops or around the park with friends. A pair of well-fitting trainers will act as shock absorbers, helping reduce the impact on your knees.

If treatment has caused nerve or nail damage to your feet, you’ll also need comfortable socks and space for your toes to move freely. When you’re buying trainers it’s not unusual to choose a size bigger than your normal shoe size.

If you’re new to running you may want to go to a specialist running shop to have your gait analysed to work out which shoe is best for you.

Whether you’re walking, running or jogging it’s good to have kit that is flexible for all weathers. Along with your trainers, leggings, a sports bra and a windproof jacket are really useful.

Choosing clothing that’s bright or has good reflectors will help you to be seen if you’re planning to walk or run in the winter months.

Make a splash

Swimming is a fantastic low-impact activity for all-round fitness.

If you want to wear a prosthesis when swimming, you can often find suitable swimwear on the high street, including costumes, bikinis or tankinis.

When buying swimwear, you’ll need to look for a top that is cut high enough over the breast area and under the arms to cover a prosthesis. It also needs to have some structure, which is usually provided by cups.

If you like to wear a bikini, you may want to choose one that comes in bra cup sizes, has a full cup and has a supportive under band.

You could adapt a high-street swimsuit that has cups by making your own pocket to hold a prosthesis in place. If you do this, you’ll need to wear a lightweight or foam leisure prosthesis, as other prostheses may be too heavy.

Specialist companies such as Nicola Jane and Amoena sell swimwear that has pockets already inserted.

Speedo has some good sports swimsuit options that will wear well when exposed to chlorine but also have pre-formed cups that can be adapted to fit a prosthesis.

Although you can swim in a silicone or foam leisure prosthesis, it’s important to rinse it well afterwards to avoid any possible damage from chlorine or salt water.

High impact padded sports bra
£25, M&S
marksandspencer.com
A diagnosis of breast cancer can be extremely stressful and lead to anxiety, but there are some things you can do to help take care of your mental health, as Rosie Bick explains.

Alice-May Purkiss had experienced anxiety and depression for most of her adult life, but felt that she began to neglect her mental health after she was diagnosed with breast cancer. ‘While I was in treatment I buried my head in the sand when it came to looking after my brain,’ says Alice. ‘I became much more concentrated on dealing with the cancer. I no longer had time to think about the things my brain was telling me because it was full up with cancer-related thoughts. ‘You go into survival mode.’

Anxiety can be a common problem after a diagnosis of breast cancer. A 2018 survey by Breast Cancer Care and mental health charity Mind found that a third of women experienced anxiety for the first time in their life after their diagnosis and treatment.

When hospital treatment finishes, some people struggle to adjust to their new situation. Dealing with ongoing side effects, going for follow-up appointments or worrying about new aches and pains can all take their toll on your wellbeing.

Self-help
There are various self-help techniques that can help improve mental wellbeing. Regular exercise, particularly aerobic activity, is good for mental health. Physical activity is thought to cause chemical changes in the brain, which can help to positively change our mood.

The important thing is to find an exercise you enjoy. For Alice, this was cold water swimming and yoga. If you’re not used to regular exercise, start off slowly by going for a short walk every day to give you some time to yourself.

Relaxation and mindfulness can also help. Mindfulness involves paying more attention to the present moment – to your own thoughts and feelings, and to the world around you.

There are also various free apps that may help you relax, sleep better and manage the symptoms of anxiety. You can find some useful recommendations on the NHS Apps Library nhs.uk/apps-library

Spot the triggers
Recognising what triggers stress and anxiety is often an important step towards helping you cope.

Keeping a diary can help you see how you’re feeling day to day and pinpoint triggers. Alice sought comfort by writing about her own mental health and breast cancer experience in her
book Life, Lemons and Melons. ‘My aim isn’t to speak for anyone who has been through either cancer or experienced difficulties with their mental health,’ she says, ‘but to make sure anyone who ever finds themselves in either of these boats never feels like they’re alone.’

**When to seek help**

While self-help techniques can be a great way to help deal with negative emotions, it’s important to recognise when you may need further support.

As Alice explains, ‘We all have bad days and off days, but it becomes problematic when it starts impacting your life, relationships or work. If you’ve had a period of low mood or anxiety for two weeks or more, that’s when you should chat to your GP, breast care nurse or mental health charities such as Mind and the Samaritans.’

Alice had been having cognitive behavioural therapy (CBT), a form of talking therapy commonly used to treat anxiety and depression, before her diagnosis, and resumed these sessions after treatment.

CBT focuses on changing the way we think and behave, and teaches coping skills for dealing with different problems.

Alice discovered that a combination of techniques helped her once treatment ended.

‘I’ve relied on various forms of counselling, CBT and mindfulness-based mental health support programmes to help keep me on the right track,’ she says.

If you think you might benefit from talking therapies, ask your GP or breast care nurse about how to access them.

**Talking** about what triggers anxiety with a friend or partner can help. For some people it will be obvious what the trigger of their anxiety is; for others it may not be. Speaking to a breast care nurse, calling Breast Cancer Care’s Helpline, posting on our online Forum or joining a support group can be useful for knowing you’re not alone and for finding helpful hints to deal with anxiety.

**Useful organisations**

- **Mind** mind.org.uk provides information and support to anyone with anxiety or other mental health issues
- **Anxiety UK** anxietyuk.org.uk works to support people living with anxiety and anxiety-based depression
- **Samaritans** samaritans.org provides emotional support to anyone in emotional distress or struggling to cope

Breast Cancer Care and Breast Cancer Now offer support during and after breast cancer treatment. To find out more call our free Helpline on **0808 800 6000**.
I wanted to see the world

When I was diagnosed with invasive lobular breast cancer in July 2012, I was in the grip of fear and uncertainty that I imagine all people diagnosed with cancer experience.

At my local support centre I met a lovely woman who told me that, apart from her children, breast cancer was the best thing that happened to her. When I left the hospital that day I felt the fog of despair lifting. I was determined to turn breast cancer into a positive experience for myself, too.

During my sick leave I realised how stressed I’d been at work, so I returned part time. I began thinking about travelling, and in 2014 when my daughter did an exchange at a university in Sydney, I went to visit her. I was enthralled and determined to go back.

In the meantime, stressful changes at work gave me the impetus to resign. I spent time in Australia, New Zealand, Sri Lanka, Singapore and Kuala Lumpur. I travelled around Southeast Asia for a month. I had developed a lifestyle that suited me, so I saved money and flew back to Australia – twice!

I’m grateful to breast cancer. It has motivated me to change my life around completely. I am a happier, more confident, less anxious and less stressed person. If I were only to live for five more years, would I want to spend them worrying about the cancer returning and regretting things I’d not done?

I want to see the world, feel a sense of achievement and have a head full of happy memories.

Sarah W
Someone Like Me can put you in touch, by phone or email, with a trained volunteer who has finished treatment for primary breast cancer. To find out more, visit breastcancercare.org.uk or call 0808 800 6000.
Fly fishing might not be the first thing that springs to mind when you think about cancer support. But Casting for Recovery’s free fishing retreats for people affected by breast cancer have been proving popular.

Clare was diagnosed with breast cancer in March 2014 at the age of 40. She had two young children, a new partner and had recently lost her mum to the disease.

‘It was a whirlwind,’ she says, ‘a rollercoaster of treatments and feelings.

‘After treatment you can take a bit of a step back. It’s like your safety net has been pulled away. ‘A few years down the line you can feel like you’ve been forgotten. I was coming up to five years post-diagnosis and had a bit of a meltdown.’

Clare saw a counsellor, who recommended mindfulness to help her cope.

She also came across Casting for Recovery on Facebook, and was excited to get a place on a retreat in April 2019.

### Unique retreat

Taking place throughout the UK and Ireland, Casting for Recovery retreats offer women the chance to learn a new skill, relax outdoors and meet people in a similar situation.

Clare’s was based at a hotel in Skipton, North Yorkshire.

A get-to-know-each-other dinner on Friday was followed by a practice session using fishing rods on Saturday.

‘The weather was not very good,’ says Clare. ‘But the team really looked after us.

‘Afterwards we made some flies. We all really enjoyed it, everyone concentrating and helping each other.’

The day also had a mindfulness and relaxation session.

### An amazing bunch

One benefit of the retreats is the mutual support that comes from meeting others who’ve shared a similar experience.

‘It’s a unique opportunity to get away and relax, and to have the support from other women who’ve been through the same breast cancer journey,’ says Clare.

‘I met an amazing bunch of ladies. We discussed things we wouldn’t have discussed with anyone else. We just felt safe with each other.

‘It doesn’t matter where you are in your treatment. Some women were still having chemotherapy but others like me were five or ten years plus down the line.’

### Happy memories

On Sunday, the participants met their fishing guides – all experienced fly casting experts – and spent time on the nearby lake.

‘I found it so relaxing,’ says Clare. ‘It takes your mind off everything.

Clare intends to continue using her new-found fishing skills closer to home.

She has also kept in touch, through WhatsApp, with the other women on the retreat.

‘It’s really emotional remembering our weekend,’ says Clare. ‘But it’s a fun, happy memory.

‘It brings a smile to my face thinking about it.’

For more information about Casting for Recovery, visit castingforrecovery.org.uk or call 01778 560 920.
Britain’s two leading breast cancer charities officially became one on 1 April 2019. ‘We worked together as two charities for years,’ says Delyth Morgan, chief executive of the recently formed Breast Cancer Care and Breast Cancer Now. ‘It became clear over time that we had so much in common. And by coming together we’d be able to create a comprehensive challenge to breast cancer on every front.’

Important

With over 600,000 people in the UK living after a diagnosis of breast cancer – a disease that’s still responsible for around 11,500 deaths a year – it’s clear the charity has its work cut out.

‘We want to reduce the impact of breast cancer on people’s lives and on society today,’ says Delyth. ‘There are lots of ways of doing that – through providing support and information, influencing and research – so we’re tackling it from every angle.

‘Our hope for the future is that everybody will be able to live well with breast cancer, and that people who are diagnosed will no longer die. And in the future we hope to understand much more about how to prevent the disease in the first place.’

While research will play a key role in meeting the charity’s aim that by 2050 everyone who develops breast cancer will live, support services will remain essential in making sure they live well.

Delyth says she has made it priority to spend time with people who are benefiting from the charity’s support.

‘It’s been fabulous to see first-hand the effect on people going through treatment,’ she says, ‘or talking to someone who’s had their life changed by attending Moving Forward.

‘Sadly the NHS doesn’t provide this kind of support but we know how incredibly important it is to women and men as well.’

Unique

Also at the forefront of the charity’s activities is secondary breast cancer – which happens when breast cancer has spread and is no longer curable.

‘People are living longer with secondary breast cancer,’ says Delyth, ‘but they often have very complex needs.

‘We know that specialist nurses aren’t widely available for people going through this, so we campaign very strongly for improved access.

‘The Living with Secondary Breast Cancer groups we run are really valuable and unique.

‘And alongside that is a huge portfolio of research that’s trying to understand how to stop breast cancer spreading in the first place, and to make sure that when it does it’s as manageable as possible.’

Resilient

While bringing the two organisations together is no mean feat, Delyth says the merger offers exciting opportunities for the future.

‘There are lots of new opportunities coming along,’ she says, ‘whether it’s in digital with apps like BECCA or in research.

‘We’re incredibly fortunate to have achieved so much as two charities. By coming together we can create a stronger voice for breast cancer, and a resilient organisation that will stand the test of time.’

To find out more about the merger between Breast Cancer Care and Breast Cancer Now, visit breastcancercare.org.uk/merger
Your questions answered
Breast Cancer Care’s experts answer your questions about breast cancer and its treatments

Did night shifts cause my cancer?

Q I was diagnosed with breast cancer last month. I worked night shifts for many years and read online that this could cause breast cancer. Is this right?

A For many years it was suggested that night shift work may increase the risk of breast cancer. But a recent analysis from the Breast Cancer Now Generations Study, which looked at night shift work and breast cancer risk in the UK, found no clear evidence that this working pattern increases a woman’s chance of developing the disease. This means that women who work during the night are no more likely to develop breast cancer than those who do not. Breast cancer is a complex disease and it’s impossible to identify a single cause. We don’t fully understand why some people get breast cancer and some don’t. Research suggests that breast cancer is caused by lots of different factors, but many of these are out of our control. The three main risk factors for developing breast cancer are being a woman, getting older, and for some having a significant family history of the disease.

Am I eligible for abemaciclib?

Q I have secondary breast cancer in the lung, and have heard about a drug called abemaciclib. Can I have this?

A Abemaciclib is a targeted therapy used to treat secondary breast cancer. It belongs to a group of drugs known as CDK 4/6 inhibitors. Other drugs in the same group are palbociclib and ribociclib. These drugs can be given to people who have secondary breast cancer that is both oestrogen receptor positive (ER+) and HER2 negative. Abemaciclib has been approved for use on the NHS and can be given as the first treatment for secondary breast cancer alongside an aromatase inhibitor, such as letrozole. It can also be given in combination with a drug called fulvestrant if you have had hormone therapy for secondary breast cancer in the past. Your specialist team can tell you if abemaciclib is an option in your situation.
**How can I feel better about myself?**

**Q** I’ve just finished my treatment. Can you suggest something that might help me feel better about the way I look and feel about myself?

**A** Breast cancer and its treatments can cause changes to your body, the way you look and how you feel about yourself. Some changes may be temporary, others more long-term. Research suggests the sooner you confront the physical changes to your body, the easier you may find it to gain confidence in the way you look. However, this isn’t always easy.

You could attend a Look Good Feel Better workshop. This is a free two-hour skincare and makeup session to help women with the visible side effects of cancer treatment. Workshops are held across the UK.

Boots Macmillan Beauty Advisors are available in some Boots stores to give free face-to-face beauty advice.

You can find hints and tips to help you cope with the ‘new you’ in our free BECCA app.

Talking openly about how you feel can help. Our Someone Like Me service can put you in touch with one of our volunteers who has experienced similar feelings.

It can take time to get used to the way you look and to adjust to life after hospital treatment. Looking after your mind as well as your body is important to help you regain self-esteem and confidence. You can find a Mental health toolkit at breastcancercare.org.uk/mental-health-toolkit

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**Why have I been offered a drug called sodium clodronate?**

**Q** I’ve been prescribed a drug called sodium clodronate, in addition to letrozole, as part of my treatment. Why would I need to take this?

**A** Sodium clodronate belongs to a group of drugs called bisphosphonates. Bisphosphonates can slow down or prevent bone damage. Some treatments for breast cancer can increase your risk of getting osteoporosis and your bones breaking. Bisphosphonates reduce this risk.

Research has also shown bisphosphonates may help reduce the risk of breast cancer spreading to the bones and elsewhere in the body in post-menopausal women being treated for primary breast cancer.

National guidelines now recommend that sodium clodronate, or another drug called zoledronic acid, are offered alongside other treatments to post-menopausal women who have invasive breast cancer that has spread to the lymph nodes under the arm. They may also be considered for invasive breast cancer that has not spread to the lymph nodes.

Sodium clodronate is a tablet that is taken once a day, and you’ll usually be advised to take it for two to three years.

You can find more information about sodium clodronate at breastcancercare.org.uk or by calling our Helpline free on 0808 800 6000.
More women are surviving breast cancer than ever before thanks to advances in research and treatment. Some 600,000 people are alive in the UK after a diagnosis of breast cancer.

However, it’s estimated that around 40% of people with breast cancer develop significant fears that their cancer will return. This can have a big impact on quality of life, leading to feelings of anxiety.

Talking about it
Recent research has suggested that talking about concerns during regular radiotherapy appointments may help to relieve some of these anxieties, reducing fears that the cancer will return.

This can have a big impact on quality of life, leading to feelings of anxiety.

Could training radiographers help reduce fears of recurrence?

New research, funded by Breast Cancer Care and Breast Cancer Now in partnership with the Scottish Government’s Chief Scientist Office, is hoping to help reduce women’s fears of their cancer returning. Edd Jones explains how.

M ore women are surviving breast cancer than ever before thanks to advances in research and treatment. Some 600,000 people are alive in the UK after a diagnosis of breast cancer.

However, it’s estimated that around 40% of people with breast cancer develop significant fears that their cancer will return.

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Talking about it
Recent research has suggested that talking about concerns during regular radiotherapy appointments may help to relieve some of these anxieties, reducing fears that the cancer will return.

To further investigate this, researchers at the University of St Andrews have been awarded over £110,000 to lead a new trial that trains radiographers to promote conversation with women about their fears, reducing worries and improving quality of life.

Professor Gerry Humphris, who is leading the team, believes that regular communication between women and their radiographer could influence how their fears of recurrence change over time.

‘With new funding, we’ll be able to develop a training package to help medical teams find new ways to manage and reduce patient anxiety,’ Professor Humphris explains.

‘We hope that the study will also help further improve relationships and communications between patients and their medical staff, which is likely to improve their experience and quality of life after treatment.’

Professor Humphris will lead a two-year trial that focuses on whether radiographers could be trained to help people talk about concerns they have, and how this might reduce any fears of recurrence.

Many people develop these concerns towards the end of or after they have finished their treatment and it is becoming increasingly apparent that support is needed to help them manage and reduce their fears of cancer recurrence.

Identifying the cause
In Professor Humphris’ previous study, 60 women with breast cancer had two of their sessions with their radiographer recorded. One session was before their radiotherapy treatment started and the second was during their treatment.

Using a computer program that could analyse the session recordings and identify if the participant was expressing any anxiety or stress, the research team recorded how the radiographer responded to their concerns, such as if they continued...
a dialogue where the woman could tell them more about their worries or if they closed the conversation before further discussion.

Using a questionnaire, the researchers also measured participants’ fear of their cancer returning before they started radiotherapy as well as six to eight weeks after their treatment. They found that each participant presented an average of 20 concerns in their sessions, a number much higher than previously thought in people with cancer. Around 9% of radiographers were found to block their patient’s ability to talk about their concerns and fears in more detail, suggesting that there is a need to provide training to radiographers that improves the dialogue with their patients.

‘Our initial study found that the way conversations between radiographers and patients are managed can have a significant impact, both positive and negative, on the mental wellbeing of patients and their perspective following breast cancer treatment,’ Professor Humphris explains.

The researchers also found that the more times someone brought up their concerns in their session with their radiographer, the more fear of cancer returning they experienced six to eight weeks after their treatment had finished. But when they were given more space to discuss concerns with their radiographer they had less fear of their cancer returning at the end of the study.

**Confronting fear**

To tackle these fears, Professor Humphris and his team are going to develop materials that will provide radiographers with training that helps them to understand and manage people’s concerns more effectively. The researchers hope it will lead to reduced fears of cancer returning once people have completed their treatment.

The training course will then be trialled with staff at a cancer specialist centre in Scotland to see what benefits the training package can bring. If successful, this training could see further testing at multiple centres before being rolled out to the rest of the UK.

Professor Humphris and his team will consider the views of both women affected by breast cancer and healthcare professionals to ensure that the training package helps people as much as possible and improves quality of life once treatment has finished.

To find out more about breast cancer research, visit breastcancernow.org/breast-cancer-research

-Around 40% of people develop significant fears of cancer returning
What’s good for your physical health, can help reduce side effects of cancer treatment such as fatigue and weight gain, and can improve your mood? The answer is: exercise.

Starting out, or getting back into exercising, after breast cancer treatment can seem daunting. Even the word ‘exercise’ might be off-putting. But you don’t need a gym membership or any fancy equipment to start being more active.

“You might begin with some gentle stretching and breathing exercises to help you relieve any unwanted stress and tension,” says exercise expert Lizzy Davis, who works with women on Moving Forward courses.

“If you haven’t exercised for some time, take it slowly. Build up and see how you feel each day.’

National guidelines say we should all be doing 150 minutes or more of moderate aerobic activity like brisk walking (or 75 minutes of vigorous activity such as running) every week. However, the most important message to remember is: something is better than nothing. Even 10 minutes at a time to begin with will have benefits.

Which activity?

There are many ways to incorporate regular activity into your everyday life.

Getting out for a walk is probably the easiest way to increase your activity levels.

Swimming or aqua aerobics are also great for fitness, and water reduces stress on the body’s joints.

We should also do some muscle-strengthening activities – twice a week or more according to the guidelines. Activities like yoga and pilates are good for muscle strength as well as flexibility. Balance, core and posture exercises are also a great way to strengthen our centre of gravity.

‘Be smart and safe by doing activities that are suitable for you and be sure to speak to your healthcare team before getting started,’ says Lizzy.

‘You might like to keep a diary to log and track your efforts and note changes to how you feel.

‘You might feel pain, discomfort, stiffness, fatigue or weakness to begin with. It’s important to stop an activity if you experience unusual pain.’
Three exercises to try at home

You don’t need a gym to help you start building strength. Begin with a few repetitions, then slowly build up each day to do 10 to 15 of each.

1. **Sit to stand**
   This exercise can help strengthen your legs.
   • Sitting on a chair with your feet on the floor hip width apart, slowly stand up straight, pushing through your heels, then gently lower yourself back to a sitting position.
   • Focus on squeezing your leg and buttocx muscles as you stand up and sit down.
   • You can put your hands on the chair or your thighs to help push you up, or to make it a bit harder cross your arms across your chest.

2. **Wall press-ups**
   This is a great way to start to build up strength in the chest.
   • Stand close to a wall, feet hip distance apart. Place your hands on the wall a little wider than your shoulders, with the tips of your fingers in line with the tops of your shoulders.
   • Keeping the elbows wide, breathe in as you lower your body towards the wall. Then exhale as you push the wall away to come back up.

3. **Heel raise**
   This exercise is great for improving balance as well as strength.
   • You can hold on to the back of a chair for balance. Standing with your feet hip distance apart, roll onto your toes and lift your heels high off the ground. Then slowly lower down.
   • To make things a bit harder, try doing it without holding onto the chair.

Five tips for getting started

1. Start with short walks, gentle stretching or deep breathing exercises
2. Find a friend to exercise with for added motivation
3. Use a walking app or pedometer to monitor your daily step count
4. Choose something you enjoy and that works with your lifestyle
5. Select a time in the day when your energy levels are higher

‘Exercise helped me move forward’

Exercise got me out into the fresh air during treatment and became a vital part of my self-care routine.

When you are going through treatment, sometimes just the thought of exercise can make it hard to get started.

After a mastectomy and DIEP reconstruction surgery, I remember taking things slowly. I started walking on a small stretch of path. I would increase the amount of steps on this path every day. When I felt stronger, I walked further and started marking my progress by counting the number of lampposts I passed.

Making exercise part of my daily routine helped me move forward and made sure I opened that front door every day, even when I didn’t feel like getting out of bed.

Building up from walking to running to my first-ever race helped me take control of my body. I called it my life insurance policy.

When I reflect back over treatment, I rarely think about the surgery or the chemotherapy. I think about just how far I’ve come.

This year, I celebrate five years since my diagnosis. I feel happier and healthier than ever and I know that has a lot to do with exercise.

For more information about exercise during and after treatment, visit breastcancercare.org.uk/active

Jackie Scully built up slowly from walking to running while going through treatment for breast cancer.
One tin wonders

When time is of the essence, try these quick-cook, one-tin recipes, neither of which takes more than 5–10 minutes to prepare and 25 minutes to cook.

Sticky soy and honey-roasted salmon with asparagus and sugar snap peas

This easy, flavourful dish is perfect for a quick work-night dinner. Serve as it is for a carb-free dinner, or with rice or quick cook noodles.

Serves 4

- 200g Tenderstem broccoli
- 125g asparagus spears
- 200g sugar snap peas
- 200g frozen peas
- 1 teaspoon sea salt flakes
- 1 tablespoon sesame oil
- quick cook noodles or rice, to serve (optional)

For the salmon

- 4 salmon fillets
- 1/2 tablespoon good soy sauce
- 1/2 tablespoon sesame oil
- 1/2 tablespoon honey

For the dressing

- 6cm fresh ginger, grated
- 1 lime, juice only
- 1 tablespoon sesame oil
- 3 spring onions, finely chopped
- a handful of peanuts, roughly chopped
- 1 red chilli, finely sliced

1. Preheat the oven to 180°C fan/200°C/gas 6. Put the broccoli into a large bowl, pour over a kettleful of boiling water, leave to stand for 1 minute, then drain well.

2. Mix the broccoli, asparagus, sugar snaps, frozen peas, sea salt and sesame oil in a roasting tin. Put the salmon fillets in around the veg, then mix the soy, sesame oil and honey and spread this over each fillet. Roast for 20–25 minutes until the salmon is cooked through.

3. Meanwhile, whisk the ginger, lime juice, sesame oil and spring onions together. Once the salmon is cooked, pour the dressing over the vegetables. Scatter over the chopped peanuts and chilli. Taste and adjust the lime juice and salt as needed and serve hot.
In this dense, rich cake, the pistachio gives an almost baklava-like flavour and works perfectly with the blackberries. Best eaten the day it is made, on account of the fruit.

**Serves 8**
- 150g unsalted, shelled pistachios
- 170g softened unsalted butter, plus more for the tin
- 170g golden caster sugar
- 3 free-range eggs
- 30g self-raising flour
- 1 teaspoon baking powder
- 200g blackberries, halved if very large
- Icing sugar, to dust

1. Preheat the oven to 160°C fan/180°C/gas 4, and line and butter a 28 x 22cm roasting or baking tin with non-stick baking or greaseproof paper. Blitz the pistachios in a food processor, spice grinder or Nutribullet until very finely ground (but don’t over-blitz, or they’ll get oily).

2. Beat the butter and sugar together until smooth, then whisk in the eggs. Stir in the ground pistachios, flour and baking powder and mix briefly until combined.

3. Tip the cake batter into the prepared tin and dot with the blackberries. Transfer to the oven and bake for 25 minutes, until the cake is risen, firm to the touch, and a skewer inserted into a non-blackberry bit comes out clean. Do not panic if the cake has risen like a glossy quilted blanket to hide all your blackberries – this will particularly happen with small berries – they’re still there and the cake will taste delicious.

4. Let the cake cool in the tin for 5 minutes before transferring it, with its paper, to a wire rack to cool down. Dust with icing sugar before serving.

**Recipes from**
The Quick Roasting Tin: 30 Minute One Dish Dinners by Rukmini Iyer.
Breast Cancer Care’s support services are here for you, whenever you need them.

**Someone to talk to**

**Helpline**
If you have a query about breast cancer, just want to talk things through or find more support, our nurses are at the end of a telephone line. Call our free, confidential Helpline on 0808 800 6000.

**Someone Like Me**
Someone Like Me won’t just put you in touch with someone else who’s been affected by primary breast cancer. With a network of 200 trained volunteers, we’ll find someone who understands your individual concerns.

**Online support**

**Website**
The information on our website is written by clinical specialists, so it’s reliable and up to date. Whether your question is about going through treatment or living with breast cancer, you’ll find the answer at breastcancercare.org.uk

**Forum**
Whether you’re going through treatment, moving forward or living with secondary breast cancer, you’ll find someone who understands what you’re going through on our popular online discussion Forum.

**Face to face**

**Moving Forward®**
Adapting to life after breast cancer treatment can be difficult. Moving Forward short courses take place throughout the UK to empower you to live better with and beyond breast cancer.

**Living with Secondary Breast Cancer**
A diagnosis of secondary breast cancer can mean adjusting to difficult changes. These monthly sessions provide information, support and the chance to meet other people with secondary breast cancer.

**Younger Women Together**
Come to a Younger Women Together event and meet around 30 other women under 45 who’ve been diagnosed with primary breast cancer. You’ll have the chance to talk, share and be yourself.

Find the right support for you

Call 0345 077 1893
Visit breastcancercare.org.uk
Email services@breastcancercare.org.uk
There are many ways to support Breast Cancer Care. Here are just a few.

**Will you wear it pink?**

18 October is wear it pink day. A day when thousands of people come together to wear pink, raise money and help make life-changing research and support happen.

Anne is supporting this year as she wanted to give back to charity and raise awareness among friends and family.

We can’t wait for you to join us and help support people affected by breast cancer!

Order your free fundraising kit today at wearitpink.org/vita or call 0333 20 70 300.

**Celebrate in style**

Join us to celebrate our 32 courageous models (like Beverley on page 6) as they step out in style onto the catwalk following a breast cancer diagnosis.

Help us cheer on our inspirational models at The Show London on 3 October, for a day that will be full of fun, fashion and fizz.

Buy your tickets at breastcancercare.org.uk/theshowlondon

**Choose your challenge**

Immerse yourself among London’s landmarks and peaceful parks in the 2019 Marathon Walk.

Or, if you’re looking for something more adventurous, go international and trek to one of the wonders of the world, Machu Picchu. You’ll find yourself among beautiful valleys, stunning high passes and fascinating Inca ruins on an adventure that will live with you forever.

Whether you decide to walk the streets of London or take on Peru, we’ll be there to support you every step of the way. From training to fundraising support, we’ll help you over the finish line.

Visit breastcancercare.org.uk/charity-walks
Anita Care  The most comprehensive range of breast forms, beautiful, supportive lingerie and stylish swimwear for all occasions. Designed to support women through all stages of treatment and recovery and to give confidence and comfort to those who have undergone breast surgery. Please call 01908 524048 or visit anita.com

Banbury Postiche  Est.1931 is an NHS-approved supplier that 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 wigsuk.com or call 01295 757 408.

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Chemo Headwear  Award-winning luxurious handmade headscarves, bandannas, turbans and hats that will make you feel pretty and feminine. Offering a beautiful selection of Liberty prints, checks and plain fabrics that are all natural and breathable including cotton, silk, bamboo and cashmere.

10% discount  when quoting ‘breastcancercare'  chemohheadwear.co.uk
Telephone: 01798 861501.

Jennifer Effie’s Hair Solutions  has created a bespoke hair replacement system for individuals who are undergoing cancer treatment. Our concept is to recreate how your hair looked before experiencing hair loss. Visit jehair.com to review our gallery, client testimonials and newspaper articles. Email: info@jehair.com  Call: 020 3752 5089, 5 Upper Wimpole Street, London W1G 6BP.

With over 35 years of experience, Nicola Jane  aims to restore confidence and femininity after breast cancer. Designed for women who have had all types of breast surgery, our pocketed lingerie and swimwear collection combines comfort and practicality with on-trend styles. Call 0345 265 7595 for a free catalogue or visit nicolajane.com
Pebble UK supplies armsleeves, gloves and gauntlets for the treatment of lymphoedema. With over 100 designs to choose from, these beautiful garments are made from seam-free, breathable, moisture wick fabric containing aloe vera for skin-friendly softness, and a fine knit construction for a lightweight feel. Call 0800 433 4757 or visit pebbleuk.com

SILIMA.co.uk Home to the highest-quality and most realistic post-surgery breast forms available, plus a range of stylish and supportive bras from £18 each. Silima is a trusted supplier to the NHS with 40+ years’ experience in mastectomy care. Visit silima.co.uk or call 01295 220 524 to request a catalogue.

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 suburbanurban.com or call 01306 640 123.

TenderCush products are especially designed to offer comfort and support following breast cancer surgery. Our Shaped Cushion comes in gorgeous ‘cuddle-soft’ fabric with a removable cover. Our fab patented Shoulder Bag offers discrete support when out and about, and looks and operates like an ordinary bag. Available from tendercush.co.uk or call 07980 470 072.

Womanzone ABC Introducing a Revolutionary Custom Made Breast Form, offering a Personal and Intimate Fit. We can offer an unrivalled service of care and advice, including Made-to-Measure Swimwear, free fitting and pocketing service. To see our latest ranges of swimwear, lingerie and prostheses or to order an up-to-date brochure visit woman-zone.co.uk or call 01925 220 932. Visit the Woman Zone UK Facebook page for events and offers.

Breast Cancer Care does not endorse any product advertised on these pages. Speak to your specialist team before buying compression garments for lymphoedema.
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Yes please, I’d like to hear from you by email
Email address

We never give your information to other organisations to use for their own purposes. To change your preferences, or find out more information on how we use your data, please view our privacy policy at breastcancercare.org.uk/privacy-cookies or contact supporter services on 0345 092 0800.