No more sleepless nights

New Year’s resolutions you won’t break

Find the right bra for you

The power of two

Moving forward together after breast cancer

Secondary breast cancer: raising awareness
Welcome to Vita

New Year’s resolutions. We all make them. But how often have the good intentions of January fallen by the wayside come February? On page 12, we look at some of the most common promises we make to ourselves – from ‘I’m going to lose weight’ to ‘I’m going to take up volunteering’ – and give some tips to make sure your resolutions aren’t just for New Year.

On page 14 we tackle sleep problems. There are many reasons why someone who’s faced breast cancer might have trouble sleeping – from anxiety and stress to the side effects of treatments. If you’re having difficulties getting to sleep or staying asleep, our ‘Eight sleep tips’ might help.

And on pages 18 and 19, we focus on secondary breast cancer. I spoke to a group of women at a Living with Secondary Breast Cancer meet-up, who told me why they find the group so useful. And we also round up Breast Cancer Care’s campaigning to raise awareness of secondary breast cancer and people living with it. It’s been a successful few months for the new Bucket List campaign, and it’s going from strength to strength.

Gareth Fletcher
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Dear Vita

I was diagnosed with breast cancer on 24 September 2013 – a day I will never forget. I consider myself one of the lucky ones who have responded well to treatment, and although I’m minus a breast and all of the lymph nodes on my left side, it is a small price to pay for being able to have my life back.

However, I’ve been back at work full time – a busy NHS office role – since August 2014 and have noticed I’m feeling increasingly worn out and suffering from severe joint pain. I thought perhaps it was just me – being overweight and unfit – but reading the experience of other women in Vita I feel a little bit better in realising I’m not alone.

Vicky

Dear Vita

At the age of 67, your magazine is the only one I have ever read from cover to cover in my life. Every page holds something of interest and I am thrilled each time it comes through the door. This means I can justifiably sit down with a cup of coffee (decaf of course) and forget about the housework.

After finding a pea-size lump and following diagnosis, I had a lumpectomy and three weeks of radiotherapy. I’m now on five years of hormone treatment. Apart from gaining a little weight (I need to do more exercise), I feel great. I consider myself extremely lucky and a real nag to everyone I know to check themselves.

I feel very positive and optimistic, and even though it’s only seven months since my operation, I tell myself I have a lot to be thankful for.

Looking forward to the next issue.

Beryl

Dear Vita

First, many thanks for your magazine packed full of tips and inspiration. This is also a thank you letter to five very sweet men who frequent the early morning sauna at my local leisure centre. They will probably not read this so will never know that their smiles and cheerful chatter have got me through a difficult time.

After nine months of gruelling treatment for breast cancer, I cautiously returned to swimming. Before breast cancer I had always thrashed through 60 lengths with no problem, but post-treatment a mere 10 lengths was a struggle, as was getting out of the pool. No matter – to them I was the new girl; they didn’t see the fake boob or bald head beneath the swim cap.

Over the weeks, they have opened up, sharing with me their struggles with elderly parents, wayward children and unreliable plumbers. In so doing they have given me back a ‘normal’ identity. Now I am a friendly co-sauna-ite; not a middle-aged woman who once had cancer.

Annie

Get in touch with Vita
Tweet @Vita_mag
Email vita@breastcancercare.org.uk
Write Vita magazine, Breast Cancer Care, 5–13 Great Suffolk Street, London SE1 0NS

Don’t forget to visit Vita online
www.vita.org.uk

- Read our real life stories and healthy living articles.
- Download the latest and past issues.
- Check out our blog on living with breast cancer.
New service for gene carriers launched

Have you been confirmed as having inherited an altered gene whether or not you’ve had breast cancer? If so, you may be trying to take in a lot of information and facing some daunting decisions. The new Being a gene carrier service will give you the chance to hear from experts in this field, meet others in a similar situation and talk things through.

The series of three events will be held in central London on Saturday mornings between 10am and 1pm. The sessions will start with a talk from an expert speaker, with plenty of time for questions, followed by an opportunity to discuss what you’ve heard with the rest of the group.

The topics covered are:
- talking to children and family – 6 February 2016
- BRCA-related cancer – 5 March 2016

You can attend one, two or all three sessions. To find out more or to book a place, call 0345 077 1893 or email familyhistory@breastcancercare.org.uk

More details can also be found on the local support pages of our website.

New service for gene carriers launched

Be a hero this March!

This March, you can help Breast Cancer Care support more people facing breast cancer by holding a bucket collection. We’ll send you some buckets – grab a friend and get collecting!

Wear pink, wear orange, or even a feather boa or head boppers – it’s completely up to you. You could collect at work, school, your local shop or pub. And your local fundraising team will be on hand to support you every step of the way.

Ellen from London said: ‘What a rewarding experience. We were so pleased that we were able to contribute to such a good cause!’

Small change makes a big difference.

Sign up today for your free fundraising kit at www.breastcancercare.org.uk/bucket or call 020 7960 3400 to find out more.
Bucket List campaign takes off

Breast Cancer Care’s Bucket List campaign for secondary breast cancer has had a big impact since it launched in September. After attending three party conferences, meeting with four party leaders, receiving support from lots of MPs, having a parliamentary debate and being included in Prime Minister’s Questions, it’s safe to say we’ve pushed secondary breast cancer up the political agenda. Turn to page 19 for a round-up of all the campaign activity.

Can you help make our information even better?

At Breast Cancer Care, we rely on people who’ve had breast cancer to review all our information. Whether it’s a booklet about treatment or a webpage on living with breast cancer, our information must be user friendly and reflect your experience. We’re looking for people who’ve had treatment for breast cancer to review our free publications. Can you help us? Reviewing a publication is a small task that usually takes no longer than an hour.

If you’re interested in being a reviewer, or would like to recommend someone, contact Publishing Assistant Peter Gannon at peter.gannon@breastcancercare.org.uk He will give you further information on what’s involved.

Turn to page 22 to find out why good-quality information is so important to anyone facing breast cancer.
Finding the right bra after surgery

Julie Adams, Advanced Bra Course Facilitator at John Lewis, has 25 years’ experience of fitting bras. She gives some tips for choosing a bra after surgery and explains what happens at a fitting.

Helping women find the right bra after breast cancer surgery is a passion of mine. Seeing someone with low self-esteem after their surgery get their confidence back is very rewarding. My mum passed away from breast cancer, so it’s a cause that’s very dear to me. And over the years, I’ve learnt from the women I’ve met and picked up lots of practical tips.

Going for a fitting

Department stores like John Lewis, as well as specialist lingerie shops, have fitters who can help you find the bra that’s right for you.

Our fitters are fully trained, very professional and put everyone at ease. There’s information on the John Lewis website about what happens at a fitting, so people can look at this first.

You can book a fitting over the phone, but some women just turn up at the store and ask to have one. Often it’s the first time they’ve ever been measured, and it turns out the bra they’ve been wearing up to now might not be any use.

In the fitting room we treat women who’ve had breast surgery the same as we treat everyone who comes for a fitting. The fitting takes place in a private room. We’ll give you as much interaction or privacy as you like, and will take as long as you need.

We always try to recommend the best style, but we understand that women have their own preferences.

Breast Cancer Care runs events that provide information and support on finding the right bra or prosthesis. It includes a chance to be fitted, and to see how the lingerie looks on volunteer models who have all had breast cancer themselves.
Tips for choosing the right bra

The type of bra you need after surgery will change over time. There are as many bras as there are days of the year, and everyone is different. But the following tips may help in the days, weeks and months after surgery.

- Immediately after surgery, you’ll need a bra that’s soft and comfortable, and deeper on the ribcage so it doesn’t rub against any scarring from surgery.
- A bra with more depth around the body will give good overall support.
- A front-fastening bra is useful straight after surgery, as it’s easier to put on and take off if you have limited arm movement.
- Choose a bra without an underwire while the area is recovering. The wires can apply pressure to an implant or affect how a prosthesis sits.
- John Lewis offers a bra with pockets on both sides. The pocketed side will hold a prosthesis, if you wear one, and it has a cotton lining so it also sits comfortably on your other breast.
- If you have a prosthesis, you can adapt an ordinary well-fitting and supportive bra by sewing in a piece of stretchy material loosely across the back of the cup. This will provide a pocket in your bra to hold the prosthesis.

More information

For more tips on choosing a bra after surgery, you can read Breast Cancer Care’s booklet Breast prostheses, bras and clothes after surgery. Our leaflet Your guide to a well-fitting bra is aimed at any woman who wants to know how a bra should fit.

To order or download these publications, and to find out more about Breast Cancer Care’s services, go to www.breastcancercare.org.uk or call 0808 800 6000.
After I gave birth in April 2009 I noticed a lump in my breast. This was in August but I didn’t do anything until November because I put it down to breastfeeding. I was 35; I didn’t expect it to be breast cancer.

I saw my GP who agreed with me that it was probably due to breastfeeding, but referred me to get it checked out.

I went to the breast clinic by myself and I had a mammogram, ultrasound and a biopsy. They told me the biopsy showed abnormal cells and that I should bring someone with me when I came back for the results. They said to prepare myself because it could be cancer. I realise now that they probably knew what my diagnosis would be, but they didn’t want to tell me when I was by myself.

When I went back with my husband, I looked round the waiting room and everyone else was on their own. This couldn’t be a good sign. I knew if a nurse came in with us it was going to be trouble. We walked into the consulting room and the nurse was sitting there. The doctor said: ‘I’m afraid it’s cancer.’

I asked what the plan was and they said I had to have more scans to check if it had gone anywhere. The scan showed spots on my liver and the doctor told me my breast cancer had spread.

I didn’t know what secondary breast cancer was. I didn’t know what it meant. But I was told that I was going to die from this. I’d just had a baby and now I didn’t know how many birthdays and anniversaries I would see.

The nurse suggested that I shouldn’t Google or look at the statistics. She told me: ‘Everyone is different – they are not you.’ But of course you do look. I looked online and was convinced I wouldn’t make it to 50.

I went on a secondary breast cancer support event held by Breast Cancer Care. I didn’t know how I would cope meeting people and forming friendships with people who might then die – I didn’t know if I wanted to be in that environment. But it was the best thing I have done.

It wasn’t all doom and gloom. We shared worries that you don’t want to pass on to your friends and family, as well as having a few laughs.

My advice to anyone newly diagnosed with breast cancer is to reach out for whatever support is going. When you get diagnosed you’re given a lot of information on your condition – read it when you’re ready and find out what’s available.

My diagnosis was more than five years ago. I’ve since seen my son go to primary school and my daughter go to university. I celebrated a 10th wedding anniversary and had my 40th birthday party – I had a roller skating party and I went dressed as Wonder Woman.
The power of two

Deirdre Macfie and Morna Mcintosh formed a close friendship after they met on a Breast Cancer Care Moving Forward course.

Both Deirdre and Morna were diagnosed with breast cancer in the summer of 2014; Morna was 45, Deirdre 60.

‘I was fine and felt upbeat about my diagnosis,’ says Deirdre. ‘Towards the end of treatment, I was feeling unsure about the next step.’

Deirdre, who lives by herself in Tayport near Dundee, says: ‘After treatment, it felt as though people thought I was cured, that everything was over and I didn’t need support anymore.’

Morna was also apprehensive when her treatment ended. ‘I felt like my life was at a standstill. I was thinking “What’s next?” I decided to go to Moving Forward to find answers.’

Finding answers
Both women enrolled on the Dundee Moving Forward course, which offers information and support to help women adjust to life after treatment.

‘It was wonderful to find out that anything I was worried about, other people were worried about too,’ says Deirdre. ‘None of my experience was unique.’

Morna found the course made her want to ‘get up and go’.

‘Even my partner noticed a difference after the course,’ she says. ‘It made me want to get on with life.’

Paddlers for Life
Before breast cancer, Deirdre had enjoyed sea kayaking in her spare time. ‘I thought I’d never be able to do it again,’ she says. ‘But I love being on the water.’

She happened to see Paddlers for Life – a dragon boat team made up of women who’ve had breast cancer – on a TV show. ‘I got really excited and contacted them straight away,’ she says. ‘I decided to go to Windermere to see the Paddlers in action. Unbeknown to the two friends, however, Deirdre had in fact signed them both up to take part in a regatta, so they ended up paddling themselves. ‘It was wonderful,’ says Deirdre. ‘Speaking to people who were further down the track after breast cancer made me realise that life doesn’t stop.’

The future
For Deirdre, part of moving forward after treatment has involved coming to terms with changes. ‘You think you’re going to be the same person, and the people around you think so too. But you’re not the same, you’re different. It’s about accepting that, and embracing it, rather than fighting it,’ she says.

Deirdre recommends planning enjoyable things to do for after treatment finishes, whether it’s a holiday, pampering weekend or something you enjoyed before treatment and haven’t done for a while. ‘It helps with “the void” you experience when treatment and hospital visits end.’

This year, Morna successfully completed the Ben Nevis Challenge for Breast Cancer Care.

‘Moving Forward allowed me to put the last year behind me,’ she says. ‘I feel so positive about the future. And it’s just so great to have met someone like Deirdre.’

To find out more about Moving Forward, visit www.breastcancercare.org.uk or call 0345 077 1893.
Unten two years after she was diagnosed with breast cancer, Debbie Simmons cycled from London to Paris to raise more than £3,500 for Breast Cancer Care.

After four days, 300 miles, and over 12,000 feet of climb, Debbie could finally see the Eiffel Tower rising two miles in the distance – the end point of an epic cycling challenge. ‘Everyone was clapping when we finally arrived,’ she says. ‘My husband had come over and was cheering for me. It was amazing.’

The start of the journey had seemed less promising, when a thunderstorm on the first day washed gravel into the roads causing numerous punctures in the group of riders. ‘It was a long day,’ says Debbie, ‘and everyone was cold and damp by the time we got the ferry to Calais.’

But the challenges of the first day were left behind as the group cycled through the villages and medieval market towns of Northern France. A highlight was seeing the First World War graves on the former battlefields of the Somme. ‘It was really thought-provoking,’ says Debbie.

Finding out
Debbie, who lives in Thurso in Scotland, was diagnosed with breast cancer in November 2013 at the age of 47. She noticed a lump in her breast while doing press-ups in a circuit training session. During the difficult time between seeing her GP and having tests at the breast clinic, Debbie used Breast Cancer Care’s online Forum for support. ‘I found there were people like me who felt the same as I did,’ she says.

Debbie was diagnosed with mucinous breast cancer, a rare type of cancer that accounts for less than 2% of all breast cancers. Just before Christmas, Debbie had a lumpectomy. But tests showed the surgery hadn’t removed clear margins of breast tissue, and more surgery would be necessary. ‘I was floored and very upset,’ says Debbie. Debbie, who went on to have a mastectomy and reconstruction in April 2014, contacted Breast Cancer Care’s one-to-one support service: Someone Like Me. The volunteer she spoke to helped prepare her for the surgery.

‘She was amazing,’ says Debbie. ‘We had three or four phone calls. She talked me through the operation – she’d had the same type of reconstruction. When I went to hospital, I knew what to expect and it wasn’t a shock. She phoned me when I got out of hospital too.’

Back to fitness
Since completing the London to Paris Cycle Ride, Debbie has joined her local cycling club.

‘I always wanted to join a cycling club but never felt good enough. But I feel fitter now than I’ve ever been, and I plan to keep cycling.

‘I want people to know that breast cancer is not the end. You can get fit again.’

London to Paris Cycle Rides 2016 start on 8 June, 27 July and 31 August. Visit www.breastcancercare.org.uk
I’ve had lumpy breasts for years, and the first time I found a lump I was terrified it was cancer. I spent the night crying, convinced I’d be dead in two years. My mum said I’d be fine and, luckily, I was. An ultrasound just showed cysts.

I’m now a consultant breast surgeon, and spend my days treating scared, anxious women. My waiting room is full of fear. Most women are fine, and I can send them on their way with a smile.

I found another lump in 2014. I was almost certain it was another cyst cluster, but the worry was always there, at the back of my mind. Everyone told me it would be fine.

I know that people mean well, but I hate this phrase. I’ve said it to patients before, and have had to eat my words when a scan shows something unexpected, which is a horrible conversation to have. It’s making a promise I can’t keep. How can friends and family promise things will be fine?

How can they know for certain? This time I had a mammogram. My first. And it was OK – a tight squeeze for a few seconds. The scan showed cysts. Everything was fine.

In March 2015 I noticed a lump in the other breast, and an ultrasound showed another cluster of cysts. I started to feel like I was wasting everyone’s time. I’d been back twice in six months.

In June 2015 I’d noticed a new lumpy area in the same side as March, and I was sure it was just cysts again. I finally mentioned it to my mum, and agreed to get it checked. I had another mammogram, and was quite blasé about having an ultrasound.

Reassuringly, the mammogram was normal. Next came the ultrasound.

Before the doctor did it, she asked me if I wanted to see. I said yes, because everything was going to be fine. We both looked, and it wasn’t fine.

It was an obvious cancer. And it was big.

Instantly the following thoughts went through my head: I need a biopsy – I tell patients it doesn’t hurt, but does it? Has it spread? I’ll need a mastectomy. I’ll need chemotherapy. I have a clinic and an operating list tomorrow – how the hell am I going to cope?

No learning curve for me. I knew too much. I knew the answers to all those questions and all the possible outcomes. And I couldn’t share that information with anyone. I didn’t want to frighten them – it was bad enough knowing myself.

It wasn’t really happening. It couldn’t be happening.

Suddenly I knew my life would never be the same again.

Follow Liz through her treatment and beyond on her blog liz.oriordan.co.uk

Consultant breast surgeon Liz O’Riordan was used to treating women with breast cancer, but her own diagnosis in 2015 came as a shock.

It will be fine
How to keep your New Year’s resolutions

With 2016 on the horizon, Katie Parsons examines some of our most common New Year’s resolutions, and gives some handy tips for sticking to them.

I will get back to a healthy weight

Whether you’ve put on weight during or after treatment for breast cancer, or just want to shed some unwanted pounds, the following may help.

- Reduce your portion sizes.
- Eat at least five portions of fruit and vegetables a day.
- Choose wholegrain varieties of bread, pasta and cereals.
- Use lower-fat dairy foods.
- Go for lean cuts of meat and trim off as much fat as possible.
- Include beans and pulses in your diet.
- Limit the amount of alcohol you drink.
- Keep biscuits, cakes, chocolate and crisps for occasional treats.
- Exercise regularly, incorporating a range of moderate-intensity activities (you should break a sweat, but still be able to hold a conversation).

Dietitian Nathalie Jones says: ‘When deciding to lose weight, try to think about where you could be this time next year. A pound a month may not seem like a lot but, in a year’s time, that’s nearly a stone off and two dress sizes smaller. It also means not having to totally change your lifestyle at one time.’

I will eat more healthily

Even if you don’t need to lose weight, it’s important to eat healthily and you’ll feel better for it too.

Try to eat a variety of foods from each of the main food groups, every day:

- plenty of fruit and vegetables
- plenty of bread, rice, potatoes, pasta and other starchy foods – choose wholegrain varieties whenever you can
- some milk and dairy foods
- some lean meat, fish, eggs, beans and other non-dairy sources of protein.

In addition:

- avoid sugary food and drinks too often
- avoid eating fatty foods too often
- drink alcohol only in moderation.

Dietitian Nathalie Jones says: ‘Keeping a food diary can be very helpful for identifying when you get hungry and the choices we often make automatically, without thinking.’

If you need more information about diet after breast cancer, talk to your GP or specialist team, who can advise you or refer you to a dietitian.
I will try out a new activity

Taking up a new hobby can be a great way to make new friends, and discover interests and skills you didn’t know you had.

During treatment for breast cancer, Vita blogger Jackie Scully took up running. ‘Running has given me so much,’ she says. ‘Through treatment, it was the reason I got out of bed and into the fresh air. After treatment, it was one of the main reasons I lost all my chemo weight and got back into shape. And now, it is the reason I am attempting the biggest challenge of my life by taking on the London Marathon in April.’

It doesn’t have to be a physical activity though – consider knitting, baking, joining a book club or even learning a new language.

To help you find an activity that’s right for you:
- ask friends and family for ideas
- think about any specific skills or experience you might have – a new hobby could just be an extension of this
- keep an open mind and consider new areas of interest – you don’t know until you try!

Remember to check with your GP or specialist team before taking on anything strenuous.

I will volunteer

Many people find volunteering for a charity or organisation really rewarding, and lots of fun.

- Find out about volunteering opportunities at a charity or organisation close to your heart, or a campaign that speaks to you.
- If you don’t want to volunteer on your own, ask a friend or family member if they would be interested too.
- Find out if expenses will be paid for things like travel and meals.
- Check what hours you would have to commit to, and if training is provided.

Claire Knight, Head of Volunteering and Engagement at Breast Cancer Care, says: ‘Some people tell us their volunteering has brought them a feeling of self-esteem and pride, that they have discovered personal qualities they never knew they had.’

You can find out about Breast Cancer Care’s volunteering opportunities on our website www.breastcancercare.org.uk/volunteer For more information about volunteering, see www.volunteering.org.uk

And to make sure I stay motivated...

Sticking to resolutions can be difficult, but needn’t be a chore. Here are some tips to stay on track.

- Start with one resolution so you can focus your energy on one area.
- Break your resolution down into small, manageable steps, and reward yourself for achieving each one.
- Tell your family and friends about your resolution so they can support you.
- Set realistic goals – resolutions are supposed to be challenging, but shouldn’t make you miserable!
Your health

No more sleep

Everyone knows what it’s like to have a restless night now and again, but if you’re frequently struggling with insomnia, our tips could help.

The NHS website defines insomnia as ‘difficulty getting to sleep or staying asleep for long enough to feel refreshed the next morning’.

There aren’t any official guidelines on how much sleep you should get each night. But the important thing is whether you feel you’ve had enough sleep. Regularly not getting enough can significantly affect your quality of life, your mood and even your relationships.

There are many reasons why someone who’s had breast cancer might have trouble sleeping.

Stress and anxiety
Feeling stressed or anxious after a diagnosis of breast cancer is only natural. You might be anxious about making important decisions about your treatment. You might be worried about cancer coming back. If you have secondary breast cancer, you may feel very uncertain about the future.

Stress and anxiety can make you feel nervous, worried and tense and these feelings can affect your sleeping patterns. And if anxiety regularly stops you sleeping, going to bed itself can become a source of anxiety.

One tip is to write down your worries and concerns, and how you might deal with them, before you go to bed. The idea is to stop you worrying about them while trying to get to sleep.

It’s also a good idea not to lie in bed worrying that you can’t get to sleep. Get up, go to a different room and do something relaxing until you feel sleepy, then go back to bed. You could try listening to a relaxation CD or app, or some music, and practise taking deep, calming breaths.

Physical effects
Some treatments can cause side effects that make sleeping difficult.

For example, hormone therapies like tamoxifen can cause hot flushes and night sweats. Many women get flushes at night, which can lead to disturbed sleep and waking in a cold, damp bed and needing to change the bed linen. Getting back to sleep after a night sweat can be difficult, especially if you have to change your bedclothes.

It’s worth speaking to your specialist team or GP as there may be treatments that can help with hot flushes. You can also find tips in our booklet Menopausal symptoms and breast cancer.

A group of hormone therapies known as aromatase inhibitors can cause joint pain, which might also make it difficult to get to sleep. If you’re experiencing joint pain, discuss this with your GP, cancer specialist or breast care nurse, who may be able to suggest ways to help, such as taking anti-inflammatory pain relief.

Pain can also be a physical effect of secondary breast cancer. Our Secondary breast cancer resource pack has information on controlling pain in secondary breast cancer, including a pain diary.

Drugs
Steroid drugs can cause difficulty sleeping. Steroids may be given for a number of reasons, for example to relieve sickness from chemotherapy or to treat secondary breast cancer. If your medication is affecting your sleep, talk to your doctor or specialist nurse.
Eight sleep tips

1. **Keep a routine**
   Set a regular time to go to bed and wake up each day.

2. **Relax before bedtime**
   Do something relaxing before bedtime, like having a warm bath or listening to some calming music.

3. **Keep it dark and quiet**
   Create a dark, comfortable and quiet sleep environment, for example by using thick curtains or blinds, an eye mask or earplugs.

4. **No phones in bed**
   Keep the bedroom for sleep only – don’t watch TV or use your computer, tablet or phone while in bed.

5. **Don’t drink before bedtime**
   Avoid caffeine and alcohol for a few hours before going to bed.

6. **Limit naps**
   Try to limit naps during the day to less than an hour.

7. **Get physical**
   Do some regular physical activity, but avoid exercising within three hours before bedtime.

8. **Write it down**
   Write down any concerns, and how you might deal with them, before bedtime.

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**When to seek help**

If difficulty getting to sleep or staying asleep is affecting your daily life, speak to your GP or specialist nurse, particularly if you’ve tried the tips on this page and they haven’t helped.

A particular type of therapy called cognitive behavioural therapy (CBT) may be an option to help with insomnia. CBT is a talking therapy that can help you manage problems by changing the way you think and behave.

Sleeping tablets are another possible option. However, they can have side effects, and they’re usually only prescribed as a short-term solution. You can also buy some sleep remedies over the counter from chemists, which may help – but check with your specialist nurse or GP that it’s OK for you to take them.

Some people find yoga, meditation and relaxation techniques help them to relax and aid sleep.
I’ve been back at work for two weeks after breast cancer treatment and feel I can’t cope. I’m tired all the time, can’t remember anything and cry every day. I’m desperate to get back to normal. What can I do?

Going back to work after time off for cancer treatment can be difficult. It’s normal to feel tired for several months after treatment and many people wonder whether they’ll still be able to do the job they used to do.

Wanting to be back to ‘normal’ is a common reaction at a time like this. Being diagnosed with cancer and going through treatment can affect you both physically and emotionally, and it’s important to allow time to adjust to this change.

People with cancer are protected by the Equality Act 2010. Employers are required to make reasonable adjustments to help employees return to work, to have time off for medical appointments or continued treatment and recovery.

Often people push themselves too much at first, and taking regular breaks is important. You may feel tired and weak after treatment, and fatigue can sometimes lead to trouble remembering things and leave you feeling more emotional than usual.

You could discuss how you’re feeling at work with your manager. If there’s an occupational health adviser or human resources department, they have a responsibility to support you to be able to do your job and help you with any health or medical problems that affect your work. You can also talk with your doctor.

The following tips may also help.

• Keep a diary of when you feel less tired or need to rest so you can plan your day.
• Try to stay active and do some exercise you enjoy or go for a walk at lunchtime.
• Ensure you get enough sleep.
• Plan and pace your day at work and at home, prioritise tasks and don’t do anything that isn’t essential.
• Some people feel that complementary therapies help them feel less anxious.

Q I’ve been told I need both chemotherapy and radiotherapy after surgery for my breast cancer. Do I need both treatments or could I just have one of them?

A Many people need both chemotherapy and radiotherapy to treat their breast cancer. This is because they do different things. Chemotherapy is usually given before radiotherapy.

Chemotherapy is a treatment using anti-cancer (also called cytotoxic) drugs. The aim is to destroy breast cancer cells. It’s known as a systemic treatment as the whole body is exposed to the drugs. It’s given to reduce the risk of breast cancer coming back in the breast or elsewhere in the body in the future. Chemotherapy can be given either before or, more commonly, after surgery. Whether you’re offered chemotherapy depends on various things, such as the size of your breast cancer, whether lymph nodes are affected, the grade of your cancer and the oestrogen receptor (ER) and HER2 receptor status. Read about these in our booklet Understanding your pathology report.

Radiotherapy is a treatment that uses carefully measured and controlled high energy x-rays. Radiotherapy aims to destroy any cancer cells that may be left behind in the breast area after surgery. It’s given to reduce the risk of cancer returning in the breast, and only treats the area that has been affected by your breast cancer. It’s known as a local treatment. It’s always recommended after breast-conserving surgery (also known as wide local excision or lumpectomy). Sometimes it may be given to the chest wall after a mastectomy, for example if lymph nodes under the arm are affected or the cancer is large.

If you have any questions about your treatment plan, speak to your oncologist (cancer specialist) or breast care nurse. You may also find our booklets Chemotherapy for breast cancer and Radiotherapy for primary breast cancer helpful.
I have secondary breast cancer which has spread to the skin. I’ve been having chemotherapy for this, but my specialist said that if this isn’t effective he may refer me for electrochemotherapy. What is it?

Electrochemotherapy is a newer way of treating breast cancer when the cancer affects the skin. It’s a local treatment, which means it will not treat any other areas of secondary breast cancer in the body. It combines the use of a low dose of chemotherapy with electrical impulses, and may be used when other treatments haven’t worked.

The treatment can be given under local or general anaesthetic, depending on the size of the area to be treated. The chemotherapy is either given as a drip or injected directly into the area(s) being treated. Electric impulses are then given using an electrode, which has a number of small needles on a plate or probe that’s inserted into the area(s) of cancer to be treated. The electric impulses cause pores to open in the cancer cells. This allows the chemotherapy to enter them directly and have a better effect.

The procedure usually takes about 30 minutes. Afterwards, the area is covered with a dressing, which may need changing regularly. This procedure can be repeated after a few weeks if required.

Most people have the treatment as a day case, which means they won’t need to stay in hospital overnight.

Electrochemotherapy usually causes few side effects because the dose of chemotherapy given is low. However, you may experience:

- pain in the area treated (usually mild)
- feeling sick and, in a few cases, vomiting
- discharge from the wound
- infection.

You can talk to your specialist about this treatment and what’s involved.
I’m on my way to meet 10 women at a Living with Secondary Breast Cancer meet-up in Sutton, Southwest London. When I arrive at the venue, a guest speaker is talking to the group about lymphoedema, a long-term condition that can affect some women who’ve had breast cancer.

After the talk has finished and questions have been answered, I have a chance to ask the women why they come to these meet-ups. ‘I see the group as part of my treatment,’ says Suzanne, and everyone nods in agreement. She also comes to find out information about her condition. ‘You don’t always take everything in at the hospital,’ she explains.

The fact that everyone in the group has secondary breast cancer is clearly crucial. Rachel, who has come today for the first time, previously went to a support group where the other women had primary breast cancer. But living with secondary breast cancer ‘is a different world’, she says.

There’s a general sense in the room that not enough people know what it means to have secondary breast cancer. ‘My family and friends don’t get that it’s life-limiting,’ says Rachel.

‘Here, on the other hand, ‘Everyone’s in a similar situation,’ says Eleanor. ‘And even though our circumstances are different, everyone gets it.’

Not just about cancer
Living with Secondary Breast Cancer meet-ups take place at venues across the country every month, allowing the group members to talk openly to others in their situation. Every other month, the sessions also include a guest expert speaker, covering topics from lymphoedema and pain management to physical activity and financial benefits.

But the women here today don’t always just talk about cancer. ‘We do laugh a lot,’ says Eleanor. ‘Especially about our husbands!’ adds Marion. Although joking, she’s raised a serious point – it’s a difficult and confusing time for husbands and partners too, she explains. Marion found listening to people’s experiences of secondary breast cancer upsetting the first time she came. ‘But it’s opened my eyes and been a great help,’ she says.

A valuable service
I join the women for lunch, which is provided at the longer sessions. They chat about many topics, from the difficulty of talking to teenagers about secondary cancer, to plans for a Christmas lunch in a local pub.

One thing the women like about this group is that they don’t get the sort of awkward comments they receive from (albeit well-meaning) friends. They can all relate to being told ‘You look so well’ or being asked ‘Are you feeling better?’

‘My doctor is so upbeat because my secondary cancer is under control at present,’ says Dee, ‘which is good.’ But occasionally she admits she’d like the medics to acknowledge that it’s still tough being in her situation.

I get ready to leave the group after lunch, before they begin their regular meet-up session. I’m struck by how supportive the atmosphere is. Everyone listens closely to whoever is talking, before offering empathy, tips and support based on their own experience.

And it’s clear from talking to the women how much they value the service. ‘It has saved my life,’ says Eleanor.
Pushing secondary breast cancer up the political agenda

In September, we launched a campaign to raise awareness of secondary breast cancer, highlighting the experiences of people living with this incurable disease and the things we believe need to happen to improve care and support.

Our Bucket List campaign has gone from strength to strength. We asked five women with secondary breast cancer what was on their bucket lists, as well as the one thing they think the government should do to better support people who have been diagnosed.

The five things those women said formed Breast Cancer Care’s own bucket list for secondary breast cancer:

1. No one living in unnecessary pain.
2. Everyone having access to the treatments they need.
3. All patients having a clinical nurse specialist as part of their care.
4. Hospitals being able to plan services to meet patients’ needs.
5. Everyone’s care being co-ordinated and joined up.

Armed with our bucket list, we attended the Labour, Conservative and SNP conferences in September and October, joined by some of the women who’d taken part in the campaign.

In Brighton, our volunteers Emma and Frances spoke to Jeremy Corbyn about what living with the disease is like. In Manchester, David Cameron spoke to Dee about our campaign and, in Aberdeen, Nicola Sturgeon came to our exhibition stand to find out more.

Tuesday 13 October was Secondary Breast Cancer Awareness Day. Four women with secondaries – Emma, Dee, Heather and Sue – met almost 90 MPs who showed their support for improving care for people living with the disease. Six-hundred people also sent a message to health ministers in England, Wales and Scotland calling for better support.

The campaign got attention in Parliament too. At Prime Minister’s Questions, Jeremy Corbyn called on the prime minister to ensure data is collected consistently on secondary breast cancer – a key point of our campaign. David Cameron agreed this was an extremely important issue.

There was also a debate in Parliament. Jane Ellison, Public Health Minister, said the government ‘want[s] to do a lot better in tackling cancer, and our aim is to lead the world’. She highlighted improvements to date, including the recent cancer strategy with measures for secondary breast cancer. ‘But we do want to go further,’ she said.

Responding to our bucket list, the Department of Health said it recognised the importance of data collection on secondary breast cancer, which was not happening consistently.

It’s been an exciting few months for the campaign, which has pushed secondary breast cancer up the political agenda. This wouldn’t have happened without our volunteers and the people who sent messages to their health ministers. Our aim is to turn this attention into action and push for real change.

Why not join the Campaigns Network to keep up to date with our campaigns? For more information go to breastcancercare.org.uk/secondary

Andy Glyde, Public Affairs and Campaigns Manager at Breast Cancer Care, tells us about campaigning for secondary breast cancer.
Wonderful winter warmers

Beat the January blues with this healthy, filling soup, comforting shepherd’s pie and a little chocolate indulgence.

Mary McCartney’s quinoa, kale and bean soup
Serves 6

- 2 tablespoons olive oil
- 1 onion, finely chopped
- 3 shallots, finely chopped
- 2 large carrots, finely diced
- 2 celery sticks, finely diced
- 400g can cannellini or other white beans (240g drained weight)
- 1 teaspoon dried mixed herbs
- 1 bay leaf
- 400g can chopped tomatoes
- 1.5 litres hot vegetable stock
- 50g kale, shredded
- 60g quinoa, well rinsed
- 25g basil leaves
- Salt and freshly ground black pepper

Heat the oil in a large saucepan. Add the onion, shallots, carrots and celery, and sauté over a medium heat for 5 minutes. Add the beans and cook for a further 2 minutes.

Add the herbs and tomatoes, then pour in the vegetable stock. Season with salt and pepper. Simmer for 20 minutes. Finally, add the kale and quinoa, and cook for a further 12–15 minutes until the quinoa is cooked through. Stir in the basil and serve immediately.

These recipes were taken from The Royal Marsden Cancer Cookbook by Dr Clare Shaw, Published by Kyle Books, Priced £19.99
Shepherd’s pie
Serves 8

- 4 teaspoons olive oil
- 400g lamb mince
- 1 onion, finely chopped
- 1 carrot, finely chopped
- 2 celery sticks, finely chopped
- 2 garlic cloves, finely chopped
- 1/4 teaspoon ground cinnamon
- 1 teaspoon dried oregano
- 1/2 teaspoon fresh rosemary, very finely chopped
- 2 teaspoons tomato purée
- 2 teaspoons tomato ketchup
- 1 teaspoon Worcestershire sauce
- 250ml red wine or stock
- 250ml hot lamb or chicken stock
- 300g cooked brown lentils
- Salt and freshly ground black pepper

For the mash
- 2–3 sweet potatoes (about 1kg)
- 2 tablespoons crème fraîche
- A little unsalted butter

To make the ragu, heat 1 teaspoon of the olive oil in a large frying pan. Add the lamb and brown it thoroughly, searing it rather than letting it stew.

Heat the remaining 3 teaspoons of oil in a large casserole or saucepan. Add all the vegetables and cook for several minutes until beginning to soften. Add the garlic, cooked lamb, cinnamon and herbs, and cook for a couple more minutes. Add the tomato puree, ketchup and Worcestershire sauce. Pour over the wine and bring to the boil until the wine has reduced by about half. Add the stock and the lentils. Season with salt and pepper. Cover and simmer gently for about 45 minutes, checking regularly to make sure it doesn’t require more liquid.

Meanwhile, make the mash. Preheat the oven to 200°C/gas mark 6.

Put the unpeeled sweet potatoes on a baking tray. Bake for 35–40 minutes until soft. Remove from the oven. As soon as they are cool enough to handle, break them open and scoop out the flesh into a bowl. Add the crème fraîche, season with salt and pepper and mash thoroughly.

To assemble, put the ragu into an ovenproof serving dish. Spoon the sweet potato mash on top, spreading it out with a palette knife and making sure that none of the ragu has bled through, then fluff up slightly with a fork for a rougher finish. Dot with a few small knobs of butter. Bake for about 25 minutes.

Chocolate pots
Makes 6 espresso-sized portions, which will keep for a week in the fridge

- 100g dark chocolate
- 1 teaspoon vanilla extract
- 150ml whipping cream

Bring a small saucepan of water to the boil. Break the chocolate into a bowl that will fit snugly on top of the saucepan. Make sure the bowl does not touch the boiling water. Turn the heat down and melt the chocolate, stirring until it’s completely liquid and smooth. Remove from the heat.

Add 50ml of just-boiled water to the chocolate very gradually. Gently mix in the vanilla and whipping cream.

Pour into small espresso cups or glasses and leave to set. Serve at room temperature as they will harden up if chilled.
Patient information – which is what we call the information we produce for people with breast cancer – can be really useful, whether you’ve just been diagnosed, are having or have finished treatment, or have secondary breast cancer. The more knowledge you have about your condition, the easier it can be to make decisions about your treatment and care.

Good patient information can help you feel more in control, reduce anxiety and help you ask questions if you don’t understand everything that’s happening.

But Googling your diagnosis might point you to information that isn’t accurate, is frightening and may not give you the whole picture.

What makes good-quality information?
Accuracy is essential. All Breast Cancer Care’s information is written by a team of breast cancer specialists and editors. It’s then checked by healthcare professionals and people affected by breast cancer. We use the latest guidelines and evidence to produce the information. And by checking it with healthcare professionals, we make sure it reflects what happens in practice.

Our information, as well as that of many other cancer charities, is accredited by the Information Standard. This scheme aims to improve the quality of patient information. If something includes the Information Standard logo, it’s been produced according to a thorough process.

The power of information
Ali Raven, Breast Cancer Care’s Editorial Manager, explains the difference that good-quality information can make after a breast cancer diagnosis, and where to find it.

Where to find our information
Breast Cancer Care information is used by breast clinics up and down the country. You’ll also find it on information points in some hospitals. All our information is available free from our website, alongside some e-books and audio files. We also produce information on CD, in large print and in braille and DAISY format on demand.

Where in the world?
Be wary of where online information comes from. Although diagnosis and treatment for breast cancer may be similar in lots of countries, it may not be exactly the same.

As well as being accurate, up to date and appropriate to where you live, information also needs to be clear. As treatments become more individualised and complex, the need for easy-to-understand information becomes even more important. It shouldn’t use jargon or overly complicated language.

Five questions to help you find good-quality information
- Who wrote the information, and who checked it?
- When was it written – is it up to date?
- Where was it written – is it relevant to where you live?
- Does it have the Information Standard logo?
- Is it clearly written without jargon?
News from our corporate partners

Asda’s Tickled Pink raises millions
Asda’s Tickled Pink campaign raised over £2 million for Breast Cancer Care in 2015. Asda’s amazing colleagues helped raise vital funds through an incredible array of pink fundraising in Asda stores throughout the UK. There was everything from sponsored baked bean baths to pink tutus and giant pink ribbon cakes. Thank you Asda!

EMCOR raises the roof at the Olympic velodrome
EMCOR – the facilities management company – raised an incredible £63,000 for Breast Cancer Care this year. Through events such as head shaves, pink days and bake sales, their employees had an amazing year of fundraising across the country. This year also saw the inaugural Tour de Wellbeing fundraising event, where 54 cycling teams went head to head on static bikes. The grand finale was hosted at the prestigious Olympic velodrome.

QVC gives its viewers a night to remember
TV shopping channel QVC put on a spectacular show on 2 October. Viewers were given the chance to buy limited-edition pink products, hear inspiring real-life stories, and donate to make a difference. QVC and all its exceptionally generous customers helped raise over £290,000 in just three hours – a heartfelt thank you from everyone at Breast Cancer Care.

Buy it with Love gives you the chance to buy a Mother’s Day gift with a difference. For Mother’s Day 2016 (6 March), companies are supporting Breast Cancer Care by making a donation for each product bought in stores, restaurants and online. The Buy it with Love website www.buyitwithlove.com goes live in February, and there’ll be lots of activity on social media in the lead up to Mother’s Day – so stay tuned!
2015 was a hugely successful year for the Pink Ribbonwalks.

Nearly 5,000 walkers raised over £1.2 million to help Breast Cancer Care be there for people affected by breast cancer. The Pink Ribbonwalks are back in 2016 and are bigger and better than ever.

**New venues for 2016**
The Derbyshire Pink Ribbonwalk is returning to Chatsworth in 2016. The estate provides a magnificent backdrop for a Pink Ribbonwalk and was a favourite among walkers when we were last there in 2014. So it’s fantastic that it’s part of the line-up again.

For the first time, we’ll also be holding a Pink Ribbonwalk at Polesden Lacey in Surrey. This idyllic location is a perfect base from which to explore the 1,400-acre estate and surrounding Surrey Hills, which has been designated an Area of Outstanding Natural Beauty.

**Brand new Glasgow at Night**
In 2015 we held our first ever London at Night Pink Ribbonwalk. It was a resounding success, and we’re extending the night series to Scotland in our new Glasgow at Night Pink Ribbonwalk. The 5, 10 and 20 mile routes will take in the best of the Glasgow skyline giving you the opportunity to see the city in a whole new light.

**Pink Ribbonwalks 2016**

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<tr>
<th>Venue</th>
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<tr>
<td>Blenheim Palace, Oxfordshire</td>
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<td>Polesden Lacey, Surrey</td>
<td>Saturday 21 May</td>
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<td>Chatsworth, Derbyshire</td>
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<td>Stourhead, Wiltshire</td>
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<td>Glasgow at Night</td>
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<td>London at Night</td>
<td>Saturday 9 July</td>
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**Calendar of our events**

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<td>20 March</td>
<td>North London Half Marathon</td>
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<td>Boxing for Breast Cancer Care</td>
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<td>1–31 March</td>
<td>Have a bucket collection</td>
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<td>April</td>
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<td>Lidl Kingston Breakfast Run</td>
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<td>17 April</td>
<td>Brighton Marathon and BM10k</td>
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<td>24 April</td>
<td>London Marathon</td>
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<td>30 April–1 May</td>
<td>Tough Mudder, London West</td>
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<td>Tough Mudder Half, Midlands</td>
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<td></td>
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<td>28–29 May</td>
<td>Ride the Night</td>
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<td>Edinburgh Marathon Festival</td>
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To register for any of the Pink Ribbonwalks, go to www.breastcancercare.org.uk/ribbonwalk or call 0370 145 0101
Helping you face breast cancer

Moving Forward short 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 • Sheffield
- Stockport • Stockton-on-Tees
- Southampton • Southend
- Tunbridge Wells • Winchester
- Worthing • Wythenshawe

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

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

Moving Forward Information Sessions
Relaxed talks on Moving Forward topics, with a chance to ask questions and chat with others.
- Post-surgery bras and prostheses
  Barnsley, 29 January
  Nottingham, 1 February
  Liverpool, 23 February
  Doncaster, 1 March

Email movingforward@breastcancercare.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 someonelikeme@breastcancercare.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@breastcancercare.org.uk to find out more.
- Birmingham, 22/23 January
- Edinburgh, 4/5 March

Living with Secondary Breast Cancer
Regular meet-ups for people living with secondary breast cancer. With expert guest speakers.
Email secondarieservices@breastcancercare.org.uk
- Birmingham • Bristol • Cardiff
- Cornwall • Derby • Edinburgh
- Forth Valley • Glasgow • Halifax/Huddersfield • Lanarkshire • Leeds
- Liverpool • Manchester • Maidstone & Tunbridge Wells • North London/Hertfordshire • Oxford • Poole
- Romford • Sheffield • Sutton/South London • York/Harrogate

Email secondarieservices@breastcancercare.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.

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

0345 077 1893
About The Girl Fabulous, stylish pocketed bikinis, tankinis and swimsuits, and gorgeous post-surgery lingerie. Receive a complimentary swim beanie with all pocketed swimwear purchases. Excellent personal customer services, advice and care, easy returns policy and quick despatch. Find our blog on style after surgery, visit www.aboutthegirl.co.uk or call 01444 417791.

Amoena From gorgeous lingerie to luxurious loungewear, stunning swimwear and high-performance fitness clothing, we have just the right thing for every moment of your day. What’s more you can relax in the knowledge that, with their fine integral pockets, our bras and clothing will hold your breast form or partial shaper safely and securely. To browse or buy from our full range, go to www.amoena.co.uk or telephone us on 0845 434 7334 for our latest catalogue.

Anita Care offers the most comprehensive range worldwide of silicone breast forms, beautiful and comfortable lingerie and stylish swimwear for all occasions. Designed specifically to give confidence and comfort to women who have undergone breast surgery using their 129 years of expertise. 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 757408.

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.

The Bra Clinic Support after surgery. Mastectomy bra specialist Susan Cooper provides an essential specialist service for women when recovering from breast cancer surgery and treatment. For online shopping, clinics and information, visit www.thebraclinic.co.uk or call Susan on 07918 656 628.

Etie’n o is dedicated to providing intense, lavish skin therapy and luxurious care for compromised skin. Created by a cancer patient, for those she knows need it most, we use only the best natural ingredients we can source. Visit www.etieno.co.uk for your complimentary book on post-cancer skincare and save 20%, code VITA20

Nicola Jane With 30 years’ expertise in mastectomy fashion, our beautiful bras and stunning swimwear 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

Nora Joan offers a comfort pillow specially shaped for women who have undergone mastectomy surgery. This crescent-shaped pillow is an envelope design with no zips or poppers, providing complete comfort for the scarred tissue. It is 100% cotton and comes in an array of colours. Contact info@norajoan.co.uk or visit www.norajoan.co.uk

PEBBLE UK – Lymphedivas arm sleeves and gauntlets for lymphoedema. Choose from over 80 different colours and designs. 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 arm lengths and two compressions. 0800 433 4757, www.pebbleuk.com

Rae Denman Medical Tattooist offers consultations on restoring your nipple and areola after reconstruction. It is a safe, painless and bespoke service in a relaxing atmosphere. For a colour boost or redefinition, try semi-permanent makeup on eyebrows, eyeliner and lips for a natural lift. 07967758714 www.raedenman.co.uk makeup@raedenman.co.uk

Silima FOR YOU! Our 2015/16 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 220524 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, 01306 640123

**TenderCush** offers comfort and support following breast cancer surgery. Whether 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 470072. Also on Facebook and Twitter.

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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
Ask the Nurse
It can be hard to talk to someone in person about breast cancer. Our expert confidential email service is here for you.

Email any question – big or small – and you’ll get a prompt reply from one of our specialist nurses.

www.breastcancercare.org.uk/atn

Vita

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Name

Address

Postcode

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.