When your partner has breast cancer
This information is by Breast Cancer Care.

We are the only specialist UK-wide charity that supports people affected by breast cancer. We’ve been supporting them, their family and friends and campaigning on their behalf since 1973.

Today, we continue to offer reliable information and personal support, over the phone and online, from nurses and people who’ve been there. We also offer local support across the UK.

From the moment you notice something isn’t right, through to treatment and beyond, we’re here to help you feel more in control.

For breast cancer care, support and information, call us free on 0808 800 6000 or visit breastcancercare.org.uk
**Introduction**

This booklet is for you if your partner has been diagnosed with breast cancer.

The information in this booklet describes how you and your partner might feel in the weeks and months following the diagnosis and also covers:

- breast cancer and treatment
- supporting your partner
- changes to your relationship
- talking to other people
- looking after yourself
- life after treatment

Finding out your partner has breast cancer is often very difficult. You may experience many different emotions and you may feel overwhelmed.

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

If you’d like to talk to someone about how you’re feeling or have questions about any of the information in this booklet, call us free on **0808 800 6000** or Ask Our Nurses by email through our website [breastcancercare.org.uk](http://breastcancercare.org.uk)

In this booklet, we focus mainly on primary breast cancer (breast cancer that has not spread beyond the breast or the lymph nodes under the arm). But you may still find some of the information helpful if your partner has been diagnosed with secondary breast cancer (breast cancer that has spread to other parts of the body).

When my wife was initially diagnosed it was a big shock to both of us. I had little idea of what to expect. I guess I thought there was nothing I could do but go with the flow of the medical process.

*Antony*
Diagnosis and the early days

How you might feel

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

Your feelings may be affected by many things, including your personality, how prepared you are for the news, any previous experience of breast cancer and the relationship you and your partner have.

You may be surprised by how intense your feelings are. Here are some words partners have used to describe how they feel:

- stressed
- overwhelmed
- alone
- scared
- at a loss
- isolated
- up and down
- worried
- can’t sleep
- helpless
- struggling
- devastated
- sad
- freaking out
- terrified
- shocked
- powerless
- frightened
- confused

Some people describe being on an ‘emotional rollercoaster’ and their feelings change frequently. You may have all sorts of questions running through your mind about what will happen to your partner and what impact breast cancer will have on your life.

Some people are scared their partner might die. You may start to worry about how you would manage without your partner, how you would cope financially and, if you have young children, how you would bring them up alone.

It’s normal to be concerned about the future. But try to take things a day at a time rather than focusing on things that may never happen.

[I felt] anger, fear for her and for our future.

Gordon
I couldn’t help but think it could mean she would die. It seems strange now to think back to that time. It’s only three or four years ago but things feel completely different now.

Dominic

Your feelings may begin to settle as the weeks and months go by. But some people continue to find it difficult to cope with how they’re feeling. If you’re struggling to cope, you could talk to your GP or your partner’s breast care nurse. You may also find it helpful to call Breast Cancer Care’s Helpline on 0808 800 6000. There’s information about looking after yourself on page 24.

How your partner might feel

Most people are shocked to hear they have breast cancer, and go on to experience many different emotions. People describe feeling angry, sad, frightened and depressed. Some people ask: ‘Why me?’ while others describe feeling relieved the cancer has been found and is going to be treated.

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

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

Sometimes you and your partner will have similar feelings at the same time. At other times you will feel very different from each other and this can be difficult.

For more information about how your partner might feel, see our booklet Breast cancer and you: diagnosis, treatment and the future.
It was because she was coping so well that I could cope. If she’d been in pieces I am not sure how I would have managed.

Peter

Initially she did not want to consider chemo or treatment that would affect how she felt about herself as a person. This increased my worries as I found it hard to face the prospect of just giving up.

Gordon

Getting information about breast cancer

While you’re coming to terms with the emotional impact of your partner’s diagnosis, you and your partner will quickly be faced with a mountain of information about test results, treatments and side effects.

Some people want to learn as much as possible, go to appointments with their partner and be involved in discussions about treatment decisions. Others prefer to be a quiet support. Everyone’s different.

How involved you are will depend on your own and your partner’s wishes. It’s a good idea to talk to your partner early on about how they would like you to be involved.

Some people say they feel useless during their partner’s treatment. Finding a practical role can be a good way to provide support. This could involve taking notes during appointments or making lists of questions to ask the consultant. There’s more information about supporting your partner on page 13.

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

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

Be aware that some sites can be unreliable. The Breast Cancer Care website breastcancercare.org.uk is a good place to start.

If you don’t have access to the internet, or prefer not to use it, we have a range of printed publications.

Our Helpline is also on hand if you would like further information or to talk to someone.

I felt frustrated, as there did not seem anything I could do. I am an engineer and like to fix things, and I could not fix this.

Peter
Breast cancer treatments

Treatment for primary breast cancer may include:

- surgery
- chemotherapy
- radiotherapy
- hormone (endocrine) therapy
- targeted (biological) therapy
- bisphosphonates

If you would like more detailed information about treatment for primary breast cancer, see our Treating primary breast cancer booklet.

Surgery

Surgery is often the first treatment for people with breast cancer. It involves an operation to remove the cancer with some or all of the breast tissue. It’s done to reduce the risk of the cancer coming back in the breast and to try to stop it spreading elsewhere in the body.

Chemotherapy

Chemotherapy destroys cancer cells using anti-cancer drugs. It’s usually given after surgery to reduce the risk of breast cancer returning or spreading. Some people will have it before surgery. Your partner’s specialist team will advise them on whether to have chemotherapy depending on the type of breast cancer they have and how far it has spread.

I tried to go to every appointment with her and definitely to appointments where results were being given or treatment options discussed. It meant we could discuss things easier between us and that I could support her when it came to taking certain decisions about her treatment.

Dominic
Radiotherapy

Radiotherapy uses high energy x-rays to destroy any cancer cells that may be left behind after surgery. It’s given to reduce the risk of the cancer coming back in the breast after surgery. Whether your partner has radiotherapy will depend on the type of breast cancer and the type of surgery they have had.

Hormone (endocrine) therapy

The hormone oestrogen can stimulate some breast cancers to grow. Hormone therapies work in different ways to block the effect of oestrogen on cancer cells. If your partner’s breast cancer is hormone receptor positive (it has receptors within the cells that bind to hormones), their specialist team will discuss hormone therapy with them.

Targeted (biological) therapies

Targeted therapies are a group of drugs that block the growth and spread of cancer cells. They target and interfere with processes in the cells that cause cancer to grow. The most widely used targeted therapy is trastuzumab (Herceptin). Only people whose cancer has high levels of HER2 (called HER2 positive) will benefit from having trastuzumab. HER2 is a protein that helps cancer cells grow.

Bisphosphonates

Bisphosphonates are a group of drugs that can reduce the risk of breast cancer spreading in post-menopausal women. Your partner can talk to their specialist team about whether bisphosphonate treatment would be suitable for them.

You can find out more about why certain treatments are recommended by reading our booklet Understanding your pathology results.
Physical and emotional changes

After surgery

Surgery for breast cancer will change the appearance of your partner’s breast or breasts. It may also cause a loss of sensation.

How you prepare for these changes is down to you as a couple. Some couples find it helps to prepare by looking at photographs of people who have had similar surgery, but this is a very personal choice. Your partner’s breast care nurse or surgeon can often provide photographs.

In the weeks immediately after surgery, the breast area may look bruised and swollen and scars are often obvious. As the swelling, bruising and scars settle down, many people begin to adjust to the changes in the appearance of the breast area. But it’s not unusual for women to continue to be worried and distressed about this. Your partner may be concerned that you won’t find them attractive and this may affect how they feel about sex and intimacy (see page 19).

You may also be concerned about the physical changes. You may be unsure about what to expect or worried about how you will react, whether you will hurt your partner and whether you will still find your partner attractive.

Some couples find it helpful to look at the scar together after the operation. On the other hand, you may not want to look at the scar or your partner may not want you to see it. However you both feel, try to keep talking so you know what each other is thinking, rather than trying to guess.

If you would like more information about having surgery see our booklet Your operation and recovery.

Changes in my wife’s physical appearance haven’t affected her attractiveness to me and I make a point of regularly telling her how attractive she is and that I love her.

Dominic
The changes were considerable, but we were given a lot of information about what to expect and why they occurred which helped.

Andy

My wife chose some imaginative wigs and made the most of a bad thing. She’s lost her hair twice so far through treatment, and each time it has grown back.

Antony

Hair loss

Many people will lose either some or all of their hair as a result of their treatment for breast cancer. Hair loss caused by chemotherapy can include the loss of all body hair, eyelashes and eyebrows. For some people this will be the most distressing side effect of their treatment.

Your partner may opt to have scalp cooling. This involves cooling the scalp during chemotherapy. It reduces the blood flow and therefore the amount of drugs reaching the hair follicles on the head.

Hair loss caused by chemotherapy is almost always temporary and your partner’s hair will usually start to grow back when their treatment is finished.

There’s no right or wrong way to feel if your partner loses their hair. Some people find their partner’s altered appearance difficult to adjust to, while others are not bothered by it or find it attractive.

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

For more information about hair thinning or loss, see our booklet Breast cancer and hair loss.
Tiredness

Extreme tiredness and exhaustion is also known as fatigue. It’s a very common side effect of breast cancer treatment and may last for weeks or months after treatment has finished.

Fatigue doesn’t always go away with rest or sleep and may affect your partner physically and emotionally. They may feel tired or exhausted and have no energy to complete even simple everyday tasks. But they may also have days when they are able to carry on as normal.

It can be difficult to see your partner unable to do the things they once did and it’s not always clear how best to help. It might be useful to ask your partner what they would like you to do. This can help them to feel in control and less helpless. It can also give you the opportunity to talk together about whether there are other family members or friends who may be able to help.

Macmillan Cancer Support has an information booklet called Coping with fatigue, which you may find useful. Order it free from Macmillan’s website macmillan.org.uk or call 0808 808 00 00.

Menopausal symptoms

Breast cancer treatments such as chemotherapy, hormone (endocrine) therapy or ovarian suppression (stopping the ovaries working either permanently or temporarily) can cause menopausal symptoms.

Most people will have menopausal symptoms during and after their treatment for breast cancer. Changes to hormone levels in the body are the main cause of these symptoms.

Menopausal symptoms include hot flushes, night sweats, vaginal dryness, weight gain, mood swings and loss of sex drive. These can affect your partner’s self-esteem and confidence, and they may seem like a different person at times.

Your partner may feel unsure about their body image and sexuality, and you may be unsure how to best support your partner.

Encouraging them to talk and really listening to how they are feeling can help you understand how you can best support them.

Our booklet Menopausal symptoms and breast cancer includes information on coping with these side effects of treatment.
Supporting your partner

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

Being able to communicate with your partner can be really helpful, and this involves listening and talking.

Listening to your partner

It can be distressing to listen to your partner if they are feeling very low or want to talk about a difficult topic. And you may be tempted to move the conversation on to something lighter.

However, listening to your partner can be really helpful for them, and can help you understand what they’re thinking and feeling. Try not to feel under pressure to ‘fix’ the problem – you may not be able to.

Some people find listening comes naturally, while for others it’s a skill that needs to be learnt. Useful tips for listening include:

- avoiding distractions by sitting somewhere quietly and switching off the TV and mobile phones
- letting your partner know you’re listening by looking at them, nodding or making comments
- checking you’ve understood what your partner has said by asking questions such as: ‘Do you mean that…?’ or ‘What did you feel like…?’
- avoiding talking while your partner is talking – don’t feel you have to rush in if there’s a break in the conversation

Frustration did sometimes get the better of me. Even though she reassured me I was a great help, I often felt I was not and did not know how I could be of help.

Peter
There may be times when you’re not in the mood to listen or feel that you’ve heard enough. Try explaining to your partner how you feel. You could suggest a break from talking and arrange to pick up where you left off later. This can also give you time to take things in and start again feeling more refreshed.

**Talking with your partner**

Many people with breast cancer find it helpful to talk about what they’re thinking and how they’re feeling. However, this isn’t always the case.

Try to gauge how much your partner wants to talk. If they begin to tell you something about their cancer, ask them if they want to talk more about it.

Talking can help you and your partner to understand each other. But there may be times when one of you doesn’t feel like talking or when you can’t talk openly.

Often being able to talk comes down to finding the time and space to do so. It might be helpful to set aside a time when you’re able to talk undisturbed, somewhere you both feel at ease. Some people find it easier to talk when they’re walking or eating together.

Sometimes you and your partner may prefer to talk about normal everyday things. Having a ‘normal’ conversation can help you both feel that cancer hasn’t taken over your life.

---

**It is hard to talk about her illness sometimes as she feels guilty about being ill and the changes it has caused. I listen to what she has to say about it and from time to time can make suggestions about how to alleviate certain symptoms.**

*Antony*
I use a phrase: ‘Hi, how’s things?’ or ‘Are you OK?’ as an automatic greeting and this really irritated her. ‘Of course I’m not OK’ was the very annoyed retort and there were times when there was tension between us.

Dominic

Holding hands tight and hugging each other is very important to help the words or instead of words.

Andy

Communicating in other ways

There are other ways to show your partner that you care. Physical affection, such as a kiss or a hug, can offer comfort and give you both a real sense of togetherness.

Enjoying each other’s company in different surroundings can also strengthen the bond between you. This might be a little time away, like a short break, or just going for a walk or out for a meal.

Even simple gestures such as tidying the house, washing up or making breakfast can speak volumes without using words. Inexpensive gifts, surprises or written notes for your partner will also show you care.

If you’re having problems communicating with your partner, there are places to go for help. Along with our Helpline and website you may also benefit from contacting an organisation such as Relate (see page 27).
I was able to support her by focusing on her needs and attending consultations and chemo sessions. I was able to discuss things with the oncologist that she didn’t want to address or was afraid to ask, basically acting as a go-between.

Paul

Attending appointments

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

If they do want you to go with them, you may find it helpful to talk about how involved they want you to be in any discussions and to plan any questions you want to ask.

If you’re caring for children or working, taking time off to attend appointments may not always be easy. Try to find out how long your partner will be in hospital and how long any further treatment sessions and courses last. Use this information to explain to your employer what’s involved and try to come to a suitable arrangement. Some employers may expect you to use paid or unpaid holiday, while others are more flexible.

Practical support

Many people want to carry on doing as much as possible during their treatment. However, side effects can often make it more difficult to continue with everyday activities.

Offering to do tasks such as shopping, cleaning, washing or gardening can be a very useful and practical way of offering support. It might be best to ask your partner what they would like you to do, so they can continue to do the things they want to do themselves. This will help them feel in control.
Involving other people

Friends and family may offer their support straight away and go out of their way to help. But there may also be people who want to be supportive but don’t know how to approach you, or worry about intruding at a difficult time.

If you and your partner would like to involve people, it’s important to find a way of telling them how they can help without putting them under any obligation. Talk with your partner about the things you may be struggling with, so that if people do offer to help you know what to say. It may be useful to offer a choice of tasks, such as cooking, cleaning, shopping or collecting children from school, as it may be more convenient for someone to do one thing rather than another.

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

If there are times when you have plenty of practical help but don’t have enough emotional support, a friend or a family member might be happy to lend an ear. Try to maintain these relationships and any activities you share; they may help you feel less isolated when people are rallying around your partner.

There were things, around the house and driving, which were not possible for my wife to do. So I made time to do those things and be a chauffeur.

Dominic
Changes to your relationship

When you partner is diagnosed with breast cancer it will often change your relationship with them. Some couples become closer. But if your partner was previously independent and becomes emotionally or practically dependent on you, this can put a strain on your relationship.

There may be times when you feel trapped and consider ending the relationship.

It may help to talk through your difficulties with your partner. Some people don’t like the idea of counselling, but discussing your feelings with someone impartial can help you both to see things more clearly and work towards resolving your differences.

Some couples find that despite trying everything to save their relationship this isn’t possible. The stress of breast cancer can add to the pressure the relationship is under and finishing the relationship becomes inevitable.

Organisations like Relate (details on page 27) offer relationship counselling, where you can talk about your relationship.

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

Our relationship improved but that’s been a feature of our partnership over the years when facing adversity.

Paul

Life has changed, we tend to do more – like holidays and weekends away. We also talk to each other a lot more, and laugh a lot – taking the mickey out of each other and being open.

Sue
Our physical relationship changed because of the hormone treatment; our sex life came to a standstill.

Peter

Sex and intimacy

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

Your partner may not feel like having sex or being intimate while they’re dealing with breast cancer and the side effects of treatment. If sex and intimacy wasn’t an important part of your relationship before your partner’s diagnosis, you may not feel particularly concerned. However, if you and your partner previously shared an active sex life, you may notice a change.

The changes to your partner’s body may affect how you feel about them sexually. Getting used to looking at the changes to your partner’s body may help make being intimate easier in the long term. Sometimes, the longer you leave this for, the harder it can be.

You may both be too tired even to think about sex. Or you may want to have sex but both be nervous about how it will feel. You may be frightened of hurting your partner during sex. If this is the case, try to let them know how you’re feeling. Otherwise they may think you don’t find them sexually attractive anymore and feel rejected. Let your partner know if you’re concerned about them enjoying sex.

Although breast cancer may lead to changes in your sex life, this can sometimes be a positive thing. You may be able to discuss and explore ways to have sex or be intimate that are comfortable and satisfying for you both. And, given time, the way you approach sex together can bring you closer.

For some people, sex and intimacy helps them feel more normal during an uncertain time.

Although it’s important not to make any demands on your partner, it’s equally important that you don’t ignore your own feelings as this may lead to resentment or frustration.
Whatever your situation, try to talk to each other about how you’re feeling. If you’re having problems, you and your partner might find it helpful to talk to the breast care nurse or GP. If you continue to experience difficulties, you might find it useful to contact a specialist organisation like Relate or the College of Sexual and Relationship Therapists (COSRT), or to discuss your feelings with a counsellor. This can be something you do together or separately, depending on how you both feel.

**Infertility**

Some breast cancer treatments can affect a woman’s ability to become pregnant in the future. Some women may be overwhelmed by their diagnosis or not want children, so may not raise the issue of fertility. But others will be extremely concerned about their chances of becoming pregnant in the future.

If you haven’t yet started or completed your family, preserving fertility may be very important. You may have been planning to have a family before your partner was diagnosed with breast cancer and the realisation that this may not be possible can be a huge shock to both of you. Some people find this easier to accept than others.

If having children of your own is important to you and your partner, fertility preservation can usually be offered before starting treatment. You and your partner can talk to the specialist or breast care nurse about the different choices available and ask for a referral to a fertility specialist.

For more information about fertility, see our booklet *Fertility and breast cancer treatment.*
Family, friends and other people

Telling other people

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

At first your partner may be reluctant to let people know. This is perfectly understandable. However, if you have a close network of family and friends it can be more stressful not telling them. Also, the people closest to you can offer practical and emotional support.

Some people may react to the news better than others, and some people won’t know what to say. Occasionally, there may be friends or family members who can’t deal with the news and withdraw from you. Even if they’re not directly affected, the reality of breast cancer or any serious illness can raise personal fears. You may want to stay in touch with these people in less direct ways, such as by email or letter.

Dealing with people

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

It might help to work out with your partner the times and days that are best to have visitors and let your friends and family know. This way you’ll be less likely to be caught at an inconvenient time or give visitors the impression that you’d rather they hadn’t come.

Everybody was very supportive. And even though most attention went to my wife, I too was asked how I felt and if I needed help. These moments you realise how valuable friends are.

Peter
At operation times, we had some unwelcome attention from some family members when really we just wanted to be on our own.

Dominic

There may be times when you prefer not to take phone calls. Letting people leave a message or encouraging them to text or email so you can respond when you’re ready can help in the short term. However, try not to put off calling people back as they may think you’re avoiding them. If answering calls becomes too stressful, try emailing or texting people to keep them up to date, or ask a willing relative or friend to keep people informed on your behalf for a while.

Families can be complicated, and there may be some people who you have a strained relationship with. With so much happening in your life, you might think that now isn’t a good time to be building bridges, or you may want to put things aside and resolve any issues. Try not to let any existing tension become worse, especially while you and your partner concentrate on the cancer treatment and its side effects.

If you have children

If you have children, whatever their age, you may worry about how they will react to your partner’s diagnosis.

Very young children may not understand at all, teenagers may not know how to deal with the situation, and adults may feel they should be old enough to cope but find it hard.

It’s usually best if you and your partner decide together how and what to tell your children. Children are very good at picking up on other people’s emotions and can often tell if something isn’t right. If they think you’re keeping a secret from them, they may feel left out and think they’ve done something wrong. Although every family is different and there are no set rules about talking to children, being open and honest with them helps them to trust you.
If your children live at home, your role in caring for them may change while your partner is having and recovering from treatment. Whether one of you has always taken most of the responsibility for looking after them or you have shared it equally, your children are likely to notice if your partner is less able to care for them.

The extra attention your children need may leave you feeling overwhelmed. Your partner may see a shift in their relationship with the children, and may feel rejected, helpless or even jealous at times.

Making any decisions concerning your children together will help your partner feel involved and ease some of the pressure on you.

If you would like to find out more, see our booklet *Talking with your children about breast cancer*. We also have a book for younger children called *Mummy’s Lump*. 
Looking after yourself

To be there for your partner, you need to look after yourself. Make sure you eat properly, get some regular exercise and try to get a good night’s sleep.

While supporting your partner is important, it’s also essential that you have some time for yourself. This may involve going for a walk, having a drink with a friend or spending part of your day writing your thoughts in a diary. Allow yourself this time without feeling guilty.

Even though you may have friends and family around you, occasionally you may feel very alone. It may seem that no one else really understands what you’re going through and that you’re cut off from the everyday lives of others.

Communicating with people in a similar situation can help. You may find our website’s discussion Forum (forum.breastcancercare.org.uk) or Someone Like Me service (see right) a good place to start.

Some people find it difficult to cope with work. If this is the case, you could consider talking to your employer about what would help you manage. You may be able to work flexible hours or take time off to be with your partner. Look at ways to try to ease the pressure of your work. If your employer has an occupational health adviser, they may be able to offer support at work.

Work and colleagues gave me all the space to work from home and take compassionate leave to go to hospital treatments.

Peter

I guess I saw my needs as secondary during the treatment process. It was only after that I realised it took a toll on me as well.

Paul
Supporting a loved one through breast cancer? Talk to someone who’s been there

If your partner has been diagnosed with primary breast cancer, your life can be turned upside down too.

You want to help but it can be hard to know the right thing to say or what practical things you can do to support.

Sometimes it can help to talk to someone else who’s been there. Our trained volunteers have been in your shoes. **You can talk freely about anything that’s on your mind.**

**Speak to a volunteer by telephone**
Contact us and we’ll match you to your volunteer.
Call 0345 077 1893
Email someoneilikeme@breastcancercare.org.uk
Website breastcancercare.org.uk/someonelikeme

**Speak to a volunteer over email**
If you’d prefer to write, then you can email a volunteer directly by heading to our website: breastcancercare.org.uk/slm
Life after breast cancer

As treatment varies from person to person, the time it takes to recover also varies. While chemotherapy may last a few months, hormone therapy can continue for several years.

When your partner does complete their treatment, you may have mixed emotions. While you will probably be keen to get your life back on track, you may also feel like things will never quite be the same as they were before. There may be a huge sense of relief that the treatment is over. But you may also feel that with no more hospital appointments or extra responsibilities to focus on, you’re uncertain about your role.

It’s likely that this will be a strange time for your partner too, and some of the feelings you have may be very similar. The physical and emotional effects of breast cancer may also continue to have an impact on you both long after treatment comes to an end.

You may worry about the cancer coming back. Your partner may continue to have check-ups and mammograms, and when these appointments are due you may both feel worried and anxious. It’s natural to feel like this and the worry and anxiety usually lessen with time. But if you find yourself constantly worrying about your partner’s cancer coming back, it might be helpful to talk to your GP or your partner’s breast care nurse.

Some couples develop a new and more adventurous attitude to life, while others simply accept a new normal. You may discover a deeper bond with each other or you may find that the feelings you once had for each other change.

When your partner has finished treatment you might both want to read our book Moving forward. It looks at some of the common concerns people have once they have finished their hospital-based treatment.
Useful organisations

Macmillan Cancer Support
macmillan.org.uk
0808 808 00 00.

Information and support on all aspects of cancer, from diagnosis and treatment to finances, work and practical issues.

Relate
relate.org.uk
0300 100 1234

Offers counselling services for every type of relationship nationwide.

College of Sexual and Relationship Therapists (COSRT)
cosrt.org.uk
020 8543 2707

Information and support about sexual and relationship issues, and find a therapist.

Mind
mind.org.uk
0300 123 3393

Information about and help for mental health issues, such as anxiety and depression.
Four ways to get support

We hope this information was helpful, but if you have questions, want to talk to someone or read more about breast cancer, here’s how you can.

Speak to our nurses or trained experts. Call our free Helpline on 0808 800 6000 (Monday to Friday 9am–4pm and Saturday 9am–1pm). The Helpline can also put you in touch with someone who knows what it’s like to have breast cancer.

Chat to other women who understand what you’re going through in our friendly community, for support day and night. Look around, share, ask a question or support others at forum.breastcancercare.org.uk

Find trusted information you might need to understand your situation and take control of your diagnosis or order information booklets at breastcancercare.org.uk

See what support we have in your local area. We’ll give you the chance to find out more about treatments and side effects as well as meet other people like you. Visit breastcancercare.org.uk/in-your-area
We’re here for you: help us to be there for other people too

If you found this booklet helpful, please use this form to send us a donation. Our information resources and other services are only free because of support from people such as you.

Donate today and together we can ensure that everyone affected by breast cancer has someone to turn to.

Donate online
Donate using your debit or credit card breastcancercare.org.uk/donate

Donate by post
Please accept my donation of £10/£20/my own choice of £

I enclose a cheque/PO/CAF voucher made payable to Breast Cancer Care

Name
Address

Postcode
Email address
Telephone

In addition, we’d love to keep you updated about our work and provide you with other opportunities to get involved with Breast Cancer Care. Please tell us how you would like to hear from us (by ticking these boxes you confirm you are 18 or over)

☐ I’d like to hear from you by email
☐ I’d like to hear from you by text message or SMS
☐ Please do not contact me by post
☐ Please do not contact me by telephone

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 or contact supporter services on 0345 092 0800.

Please return this form to Breast Cancer Care, Freepost RRKZ-ARZY-YCKG, Chester House, 1–3 Brixton Road, London SW9 6DE

Code: LP
About this booklet

When your partner has breast cancer was written by Breast Cancer Care’s clinical specialists, and reviewed by healthcare professionals and people affected by breast cancer.

For a full list of the sources we used to research it:
Phone 0345 092 0808
Email publications@breastcancercare.org.uk

You can order or download more copies from breastcancercare.org.uk/publications

We welcome your feedback on this publication:
breastcancercare.org.uk/feedback

For a large print, Braille, DAISY format or audio CD version:
Phone 0345 092 0808
Email publications@breastcancercare.org.uk
When you have breast cancer, everything changes. At Breast Cancer Care, we understand the emotions, challenges and decisions you face every day, and we know that everyone’s experience is different.

For breast cancer care, support and information, call us free on 0808 800 6000 or visit breastcancercare.org.uk

Central Office
Chester House
1–3 Brixton Road
London SW9 6DE
Phone: 0345 092 0800
Email: info@breastcancercare.org.uk