

Life after cancer

A guide to living well



Life after cancer

This booklet is for people who have finished their cancer treatment. It has information on:

- Follow-up care
- Side-effects and how to manage them
- Financial and practical matters
- Your feelings after treatment
- Living a healthy lifestyle

'Life can be better after cancer. You have the chance to change your perspective.'

Useful numbers

Specialist nurse

Family doctor (GP)

Consultant

Medical social worker

Emergency

Hospital records number (MRN)

Local cancer support centre



Contents

| | |
|---------------------------------------|-----|
| Follow-up care after cancer treatment | 7 |
| Managing side-effects after treatment | 17 |
| Fertility after treatment | 53 |
| Practical issues | 59 |
| Your feelings after cancer | 71 |
| Living well after cancer | 87 |
| What if the cancer comes back? | 107 |
| Irish Cancer Society services | 115 |

Fast facts



Follow-up care

Page 7

It's important to go to all your follow-up appointments so your doctors and nurses can check how you're doing.

Side-effects

Page 17

You may still have side-effects, or new side-effects can develop. Most side-effects can be helped by medication or lifestyle changes, so let your doctor know if you have any.

Practical issues

Page 59

Life can feel as if it's on hold during cancer treatment. When treatment ends, you may find yourself having to deal with practical issues, such as money matters, going back to work or getting life or travel insurance.

Your feelings after cancer

Page 71

Cancer can affect our emotional health as well as our physical health. Sometimes it's only after treatment is over that the emotional impact really hits home.

Living well after cancer

Page 87

After a cancer diagnosis, many people want to live a healthy lifestyle. A healthy lifestyle can help you recover faster – physically and emotionally – and reduce your risk of getting cancer again.

We're here for you

Page 115

If you or your family have any questions or worries, want to know where to get support, or if you just need to talk, you can talk to one of our cancer nurses.

Ways to get in touch

- Call our Cancer Support Line on 1800 200 700
- Drop into a Daffodil Centre.
Email daffodilcentreinfo@irishcancer.ie to find your local Daffodil Centre.
- Email us: supportline@irishcancer.ie



Support Line Freephone 1800 200 700

About this booklet

The end of treatment is a time when people often expect to feel relieved, happy and able to get on with life again, but it can take some time for your body and mind to recover and to adjust to life after cancer treatment. You may feel worried, find that you're dealing with difficult emotions or have side-effects that affect your quality of life.

Taking care of yourself



Taking the best care of your physical and emotional health after your treatment has finished can help you to:

- Feel better in yourself
- Reduce the impact of any side-effects
- Manage practical matters
- Stay as healthy as possible

We hope this booklet will give you reliable information and help you get the support you may need to help you as you move on after your treatment.

Talk to your hospital team about your treatment and care – they know your medical history and your individual circumstances.

Email: supportline@irishcancer.ie

Follow-up care after cancer treatment

| | |
|---|----|
| Follow-up care after cancer treatment | 9 |
| How often will I have follow-up appointments? | 10 |
| Why it's important to go to your follow-up appointments | 11 |
| Getting the best from your follow-up | 12 |
| What if I have problems before my next appointment? | 15 |

Follow-up care after cancer treatment

- Follow-up care is to see how you're doing physically and emotionally after your treatment.
- You may feel like you just want to forget about hospitals and cancer, but it's important to go to your follow-up appointments.
- Always contact your GP or hospital team if you have any problems between appointments.

Your healthcare team's role does not end after treatment finishes. They will continue to play an active role in your care. You will still need to have regular check-ups to see how you're doing physically, mentally and emotionally. This is called follow-up. The follow-up may involve having regular outpatient appointments, physical exams, blood tests, scans, X-rays and other tests.



Every cancer patient should have a follow-up or care plan when they finish treatment. Ask the doctor providing your follow-up care about your follow-up care plan, for example:

- When your appointments will be
- Where you will go for your follow-up
- Who will be in charge of your follow-up care
- What tests you might have
- Any other screening or care you will need

Ask your doctor about your follow-up care, so you're clear about what you need to do and know what to expect.

How often will I have follow-up appointments?

Usually you'll see your treating team or specialist nurse every 3-6 months for the first year, but it depends on your diagnosis and the type of treatment you had. Afterwards you may have appointments every 6 months or once a year for a few years.

Although you will be given appointment dates for your follow-up, if you are worried about new symptoms or have any concerns, it is important you contact your healthcare team.

Your nurse specialist, oncology liaison nurse or consultant will give you details about your specific follow-up plan once your cancer treatment has ended.

Why it's important to go to your follow-up appointments

You may have mixed feelings about your follow-up appointments. You may feel like you just want to forget about cancer. You may also feel anxious before your appointments. But it's important to go to all your appointments. Follow-up gives your doctor the chance to:

- Help with any side-effects that you may have
- Check for signs of new side-effects that may develop after you have finished treatment
- Check for signs of recurrence (the cancer coming back)
- Check that you are coping well emotionally

It's better to be aware of any changes as early as possible so that suitable treatment can be given. You can ask the consultant about any symptoms to expect or watch out for and how to manage them. Your GP can also help with any cancer-related issues and can contact your cancer doctors for you.

Follow-up care is an important part of improving your health and feeling as well as possible as you adjust to your new normal. Both your oncology team and your GP will be looking after you during your follow-up care.

If you can't go to one of your follow-up appointments, call the hospital and reschedule. It may even be possible for your hospital to arrange follow-up for you abroad, if you move away from Ireland.

Getting the best from your follow-up

Be prepared

- Take some time to think about what you want to talk about. For example, any worries or side-effects you have, or if you're finding it hard to cope. You might find it helpful to keep a journal to record how you've been feeling, what you find difficult to do, what you have managed to achieve.
- Write a list of what you want to ask.
- Have details of any medications you're taking and any questions you have about them.
- Bring a friend or family member with you for support and to help you remember what the doctor says, if you think this would be helpful.

Speak out

- Mention anything that's on your mind, even if the doctor doesn't ask.
- Be honest and try not to be embarrassed – your doctor has seen and heard it all before.
- Give as much information as you can if the doctor asks you anything.



Make sure you understand

Sometimes we leave a doctor's appointment wishing we'd asked more questions or got more information. Take your time and try not to feel rushed, even if the doctor seems in a hurry. Make sure you're clear before you leave.

- Listen carefully to the answers and ask the doctor to write the main things down if you're worried you won't remember.
- Ask the doctor to explain again if you don't understand everything.
- Take time to ask all your questions.
- Make sure you have a name and number for someone to contact if you have any further questions.
- If you see a doctor and feel you didn't get enough information or left with unanswered questions, ask to see or talk to your consultant. Your GP may also help or could contact the hospital team for you.

Be clear about side-effects and symptoms

If you're troubled by side-effects or symptoms, the more information you can give about them the better, so write down:

- What side-effects / symptoms you're worried about
- If you had them before your cancer
- How long you have had them
- How they feel and how much they are affecting you and your life
- If they have gotten worse since you first noticed them
- If they're there all the time or come and go
- If anything makes them worse or better. For example, exercising, eating certain foods
- If you have noticed any other change in your body, even if it's somewhere else from your main problem.

'Having the right information made a huge difference to me in my recovery and made me feel supported.'

Contacts



It's important to know what to do or who to contact if you have any symptoms or concerns. For some symptoms the hospital may prefer you to contact them, other times your GP might be the best person. Ask about this and get names and phone numbers so you know who to contact if you have any problems. If you're not sure who to call, our cancer nurses can advise you. Call our Support Line on 1800 200 700.



You may worry that side-effects of your treatment are a sign that your cancer has come back. This can be very distressing. Speak to your doctor if you're worried.

Ask about any other help you might need

If you'd like to be referred for counselling or other emotional support or if you'd like to talk to a dietitian or physiotherapist, tell your doctor at your follow-up appointment.

What if I have problems before my next appointment?

Your GP is your primary doctor – He/she gets letters from the hospital and can often help in determining if symptoms are related to cancer or previous treatments.

Specialist nurse / oncology liaison nurse at the hospital – Your specialist nurse can offer emotional and medical support and is often the best person to advise on what to do if you have an issue or concern. They also know what supports are available and how to access them. Your specialist nurse has the experience to know if your issue or concern needs to be reported to your specialist doctor.

Your local pharmacist can be a great source of information – They can help with your healthcare questions and advise on medicines.

Irish Cancer Society cancer nurses – Call them on 1800 200 700, email supportline@irishcancer.ie or visit a Daffodil Centre if you have any worries or questions. Our cancer nurses can support and advise you.

If you are worried or notice any new symptoms between appointments, tell your GP or call your specialist nurse for advice or to arrange an earlier outpatient appointment if necessary, especially if you have:

- A pain that does not go away, usually in one place
- New or unusual lumps or swelling
- Nausea, vomiting, diarrhoea or loss of appetite
- Unexplained weight loss
- A fever or cough that does not go away
- Unusual rashes, bruises or bleeding
- Any other symptom you are concerned about

If you become suddenly unwell and can't contact your specialist nurse or hospital team, go to your GP or the emergency department at the hospital.



Managing side-effects after treatment

| | | | |
|---|----|---|----|
| Managing side-effects | 19 | | |
| How long will side-effects last? | 20 | | |
| What can I do to improve my side-effects? | 20 | | |
| When to contact your doctor or nurse | 21 | | |
| Coping with side-effects | 22 | | |
| Fatigue | 22 | Body image | 36 |
| Memory loss and concentration problems | 24 | Sexual difficulties | 40 |
| Weight gain | 92 | Pain | 42 |
| Weight loss | 26 | Trouble sleeping | 46 |
| Loss of appetite | 27 | Lymphoedema | 47 |
| Nausea | 29 | Menopausal and hormone-related symptoms | 48 |
| Mouth and teeth problems | 31 | Effects on your bones and osteoporosis | 51 |
| Bowel problems | 32 | Other side-effects | 52 |
| Urinary problems | 34 | | |

Managing side-effects

- Common side-effects include fatigue, sexual side-effects and bladder or bowel changes.
- Side-effects usually improve within the first few months after treatment, but for some people they may continue for longer or even be permanent.
- There are things that can be done to improve most side-effects, so always ask for help if you have any side-effects that are bothering you.

Even after you have finished treatment for cancer it's common to have side-effects. Common side-effects include fatigue, sexual side-effects and bladder or bowel changes.

Keep track of any symptoms you have in a diary or journal and report them to your nurse specialist, GP or hospital consultant.



How long will side-effects last?

How long side-effects last varies from person to person and depends on the type of treatment you had. Side-effects usually improve within the first few months after treatment but for some people they may continue for longer or even be permanent.

Some cancer treatments are more likely to cause longer term side-effects. Your healthcare professional will usually discuss this with you before and after you finish treatment. Sometimes, medical conditions you had before cancer can get worse after you finish treatment, for example heart disease or diabetes.

- Most side-effects reduce or disappear completely a few weeks after treatment finishes.
- Some side-effects can last for months or years or be permanent. These side-effects are known as chronic or long-term side-effects and are not that common.
- Side-effects can sometimes develop months or years after treatment has ended.

What can I do to improve my side-effects?

If you have side-effects after your treatment has ended, the most important thing is to get help and support. Most symptoms from cancer treatment can be helped by medication or changes to your lifestyle.

Sometimes when you are no longer attending hospital as often it can feel more difficult to get medical advice and other support, but help is available.

Email: supportline@irishcancer.ie

Tip: Know the name and phone number of your nurse specialist. Your nurse specialist can advise you about any side-effects you may be having.

When to contact your doctor or nurse

- You feel that you cannot cope well with your side-effects.
- Your side-effects do not improve over time.
- Your side-effects get worse.
- You develop a new symptom that you are worried about.

You might also find it useful to read our section on coping with feelings after cancer (see page 71).

'You don't know when to worry, when you need to get help – I wish I'd got more information about side-effects.'

I'm worried that my side-effects mean the cancer has come back



Although many people have side-effects for a time after treatment, you may still worry that your side-effects may be a sign that your cancer has come back. This can be very distressing. Speak to your doctor if you are worried. See page 74 for more.

Coping with side-effects

Fatigue

Fatigue is a very common side-effect. There are many causes of fatigue, for example, chemotherapy, radiotherapy, hormone therapy, anaemia, insomnia and depression. Some kinds of fatigue can last months or even years after treatment. People will experience fatigue in different ways and for different amounts of time.

Fatigue that lasts for more than six months after treatment is known as persistent cancer-related fatigue.

A lot of cancer survivors don't tell their doctors or nurses they have fatigue because they think that nothing can be done for it, but there are lots of things that can help, depending on what's causing the problem.

Speak to your nurse specialist, GP or consultant if fatigue is troubling you. He or she can help to find out what is causing it. For example, any medication you may be taking, pain, lack of sleep or exercise, poor nutrition or medical causes such as anaemia or thyroid problems.

Our booklet *Coping with Fatigue* has lots of tips to help you manage fatigue. Call our Support Line or visit a Daffodil Centre for a free copy, or download it from www.cancer.ie

Tips for coping with fatigue

- **Plan your days:** Get to know when your energy levels tend to be better and choose how to spend your energy each day. You may have to decide which tasks are important to finish and stretch them out over the course of the day or do them when you have most energy.
- **Rest:** Build rest periods into your day. If you are going somewhere special, have a rest before you go out.

- **Get help:** Ask for help at work or at home with any tasks that you find really draining or with regular jobs such as cooking, housework or childcare.
- **Eat well:** Try to eat a well-balanced diet. Eat little and often if your appetite is poor. You could read our booklet *Diet and Cancer* for tips to help you eat well.
- **Avoid stress:** Talk to friends and family about any worries you have and take time to enjoy yourself. Counselling (see page 81) may help if you're finding it hard to cope.
- **Relaxation therapies may help**, such as visualisation, yoga and meditation. Your local cancer support centre may have sessions where you can learn these techniques. Free guided meditation videos are available online. Some hospitals have helpful resources, so ask your doctor or nurse about this.
- **Sleep:** Getting a good bedtime routine may help you to sleep better. Try relaxation techniques or listen to relaxing music and avoid stimulants like caffeine and alcohol before bedtime. Try not to use an electronic device for an hour before bedtime. Make sure your sleeping area is comfortable.
- **Naps:** Short naps (less than an hour) and rest periods are useful, as long as they don't stop you from sleeping at night.
- **Complementary therapies:** Try complementary therapies like meditation, acupuncture or massage, if your doctor says they're safe for you.
- **Ask your doctor about exercising.** It's important to be active and to get regular exercise, if you're able. Ask your doctor what exercise is suitable for you, so you can make exercise part of your daily routine. Your doctor may also be able to recommend an exercise programme for you.

'You'll have good days and bad days. On the good days allow yourself to enjoy them. And if you need to rest, that's OK.'

Exercise and fatigue

Exercise has been proven to help fatigue. If you're well enough, get some exercise on a regular basis. For example, a 30-minute walk 3 days a week might be a realistic goal and will boost your morale when you achieve it. Check with your doctor to see what kind of exercise is best for you.

Memory loss and concentration problems

You may experience short-term memory loss or difficulties with concentration or attention span after your cancer treatment, particularly if you were treated with chemotherapy (often referred to as 'chemo brain') or radiation to the head. Surgery or hormonal treatments can also affect your memory, as can stress, fatigue or dehydration.

You may have trouble remembering things, not process things as fast as you normally do or have trouble concentrating. You may feel that you can't 'multi-task' any more or find it hard to learn a new skill. You may feel disorganised and frustrated. Some people describe it as a 'brain fog'.

Memory problems can last for days, weeks, months or even years. It is important to discuss this with your doctor to make sure that there is no other cause for your memory or concentration changes. Your GP can do some simple tests to check your memory and how well your brain is working. They can then refer you for more tests, if necessary.

Tips for coping with memory or concentration problems



- Try spending an hour a day, 3 to 5 times a week reading, doing word and number games, brain teasers or jigsaws.
- Write down anything important and keep a daily to-do list.
- Use a wall planner with a calendar of events.
- Set alarms on your mobile phone to remind you of important things.
- Use a weekly pill dispenser for medication.
- Repeat what you want to remember by saying it a couple of times.
- Go through a step-by-step method with tasks you are finding challenging.
- Manage stress and find ways of relaxing and remaining calm in stressful situations. See page 76 for more about stress.



Weight loss

Weight loss can happen because of the cancer itself or because of side-effects that make it harder to eat well, such as losing your appetite, feeling sick (nausea), a sore mouth or difficulty swallowing.

Normally this weight loss does not last long. Getting help with any side-effects in the meantime should help. For some people there can be a more permanent change in their weight. See page 92 for more about managing your weight after cancer treatment.

Tips for coping with weight loss

- Tell your medical team if you're having any side-effects that may be affecting your ability to eat well or absorb your food properly, such as a loss of appetite, nausea or diarrhoea. There are ways to improve most eating difficulties. For example, there are medicines to help with nausea, vomiting and diarrhoea. You can also look at the tips in this section for things you can do to cope better with a poor appetite or other side-effects that can make eating well more difficult.
- Your doctor or hospital dietitian can give you advice about special build-up diets, which are high in protein and calories, and prescription drinks to help keep up your energy and strength. Read our booklet *Diet and Cancer* for more about high-protein, high-calorie foods.

Always tell your medical team if you're unintentionally losing weight or having swallowing difficulties.

Eating difficulties

For more information on eating difficulties, please download our booklet *Diet and Cancer* from www.cancer.ie, pick up a copy at a Daffodil Centre or call our Support Line on 1800 200 700 for a free copy.



Loss of appetite

After your cancer treatment has ended you may find that you do not feel like eating much. You may not enjoy your food or find it hard to eat. Your taste and sense of smell may not be the same.

Not eating can make you feel tired and weak and make it harder for you to recover and get back to normal.

Your appetite should get back to normal a few weeks after you finish treatment, but you can lose your appetite for different reasons, so it's a good idea to talk to your nurse specialist, GP or hospital doctor about it. For example, treating a sore or dry mouth or improving symptoms of fatigue or depression can help your appetite to come back. You may also be referred to a dietitian or be given medication to increase your appetite.

Support Line Freephone 1800 200 700

Tips for coping with a poor appetite



- **Make the most of your appetite when it's good.** Eat when and what you want.
- **Take small meals and snacks** 4/5 times a day, about every 2-3 hours.
- **Take snacks high in calories and protein.** See our booklet, *Diet and Cancer* for ideas.
- **Use a smaller plate for your meals.** Large portions can be off-putting if your appetite is small.
- **Eat slowly and chew your food well.**
- **Choose drinks that give some nutrition,** such as milk, juices and soup.
- **Try build-up drinks,** which have a balanced mix of nutrients for when it's hard for you to eat solid food. Talk to your dietitian about suitable ones for you. Your doctor can also give you a prescription for these drinks.
- **Take only small sips while eating,** as drinking might make you full.
- **Encourage your family to eat together** and make mealtimes relaxing and enjoyable.
- **Take regular exercise, if you can,** as it may help your appetite. Fresh air can help too.
- **Talk to your doctor about medications** to help other problems, like constipation, nausea, pain or other side-effects of treatment, if they affect your appetite.
- **Tell your doctor if you're feeling fatigued, anxious or depressed,** as these can also affect your appetite.

Nausea (feeling sick)

Talk to your doctor if you're feeling sick. There are medicines to help. Take them as directed. Some of the tips below may help too.

Tips for coping with nausea

- **Eat before you get hungry,** as hunger can make nausea worse.
- **If you are sensitive to the smell of cooking, try using ready meals** or avoid being in the kitchen while food cooks. If you have a friend or family member, ask them to help with cooking.
- **Eating little and often may help.** Eat slowly and chew food well.
- **Sip on clear liquids** to avoid getting dehydrated between meals.
- **Take plenty of nourishing fluids** if you miss a meal or two.
- **Rest after your meals.**
- **Try the following foods and drink** as they might help:
 - Cold, bland foods like yoghurt, desserts, boiled potatoes, rice, noodles, breakfast cereal or cheese
 - Dry food like toast, scones, crackers or breakfast cereals. This can help in the morning before you get up
 - Herbal teas like mint
 - Foods containing ginger, such as ginger ale or tea, ginger nut biscuits, ginger cake or fresh ginger in hot water
- **Some people find the following foods make nausea worse:**
 - Fatty, greasy or fried foods
 - Spicy foods
 - Very sugary foods
 - Foods with a strong smell, like onions and garlic

- **Eat foods that you like or can tolerate.** When your nausea improves, try other foods for variety (if you can tolerate them).
- **Some people find relaxation exercises, acupuncture or meditation help with their nausea.** If you're considering acupuncture, check with your doctor first to make sure it's safe for you.

Talk to your doctor if you're feeling sick. There are medicines to help. Take them as directed.

'The physical effects of cancer can affect you later on. Don't be afraid to seek medical help or go back to support services if you feel you need them.'

Mouth and teeth problems

Many people who have had cancer treatments can develop problems with their mouth and teeth. For example, radiotherapy or surgery to the mouth area can cause long-term mouth and teeth problems.

Possible problems include:

- Dry mouth
- Cavities in your teeth
- Change in taste
- Sore mouth and gums
- Bleeding gums
- Stiffness or difficulty opening or closing your mouth

Some problems may not develop until a few months after treatment has finished. You should talk to your doctor if you are experiencing any of these problems. If you are going to see your dentist, you need to tell him what type of cancer treatment you have had.

Tips for mouth and teeth problems

- **Drink lots of water.**
- **Suck on ice cubes.**
- **Chew sugar-free chewing gum.**
- **Use a spray** to keep your mouth moist.
- **Brush your teeth with a soft toothbrush** or an electric toothbrush with a soft head.
- **Use a gentle toothpaste and mild mouthwashes** that do not contain alcohol (a homemade one will do – mix 1 tsp sodium bicarbonate and ½ litre of warm water).
- **Make sure dentures are well fitted** and take them out and clean them regularly.
- **Take care with hot and spicy foods.**
- **Avoid sharp foods** like crusty bread and crisps.
- **Use gravies and sauces** to make your food less dry.
- **Avoid alcohol.**
- **Stop smoking or using tobacco products.**

Bowel problems

Changes in bowel control can happen after treatment for many cancers, such as bowel cancer. If problems carry on, you notice a new change in your bowel habit, or you're finding it hard to adjust to these changes, contact your doctor. There are also things you can do yourself.

Tips for coping with diarrhoea

- **Drink plenty of clear fluids** (1½ to 2 litres a day). Take liquids 30 minutes to 1 hour after your meal and/or between meals.
- **Eat small snacks or meals** instead of three large meals a day.
- **Your doctor may prescribe something** to control the diarrhoea. Take this as advised.
- **Take care with the following foods** as they can make diarrhoea worse:
 - Fatty, greasy and fried foods
 - Fizzy drinks
 - Drinks with caffeine like coffee, tea, cola and hot chocolate
 - Citrus fruits, like orange and grapefruit, and their juices
 - Foods containing the artificial sweetener sorbitol, such as chewing gum and diet or low-calorie products.
- **Avoid alcohol and tobacco.** They can make diarrhoea worse.
- If you have had stomach surgery your diarrhoea may be due to nerve damage, so **don't change your diet unless your doctor tells you to.**
- **If you have severe diarrhoea, you may become dehydrated** and need to be admitted to hospital for intravenous fluids.
- **Call your doctor if the diarrhoea continues or gets worse,** or if your stools (poos) are red or dark in colour.

Tips for coping with constipation

- **Drink plenty of fluids.** For example, 2 litres of water every day.
- **Eat regular meals.**
- **Eat foods high in fibre.** For example, wholegrain cereals, wholegrain breads, brown rice, wholewheat pasta, pulses (peas, beans and lentils), vegetables and fruit. The hospital dietitian can advise you on your diet.
- **Try adding flaxseed** to cereal, yoghurt or porridge to add extra fibre.
- **Drink fig syrup or prune juice.**
- **Try sitting in this special position on the toilet:**
 - Use a footrest to get your knees higher than your hips.
 - Lean forwards and put your elbows on your knees
 - Push out your tummy (abdomen) and straighten your spine.
- **Try to get some exercise,** as it can help to keep your bowel movements regular. For example, walking or yoga. Talk to your doctor or nurse for advice on what exercises you can do.
- **Tell your doctor if you're constipated** as some medications can make you constipated. For example, some pain medications.
- **Laxative tablets can help with constipation,** but talk to your doctor before taking them. If drug treatments don't work, your cancer care team may need to look for other more serious possible causes of constipation, such as pressure on the spinal cord and bowel blockage (obstruction).

Caring for a stoma



If you have a stoma this can also take some getting used to, especially if your bowel habits have changed too. Stay in touch with your stoma nurse, who can support you with any difficulties you may be having.

We have more information about caring for a stoma on our website www.cancer.ie

Urinary problems

Many people feel upset or embarrassed by incontinence and urinary problems. You may find it affects how you feel about yourself and your dignity. You might avoid going out if you're worried about having an accident or having to change incontinence pads.

It's important to remember that you're not alone and help is available. It can help to talk to a nurse and to someone who has experienced urinary leakage.

Tips for coping with urinary problems

- **Get advice about leakage:** Ask your doctor, public health nurse or see if there's a continence adviser at your local HSE health centre. There are things that can help, so don't suffer in silence.
- **Cut down on caffeine.** It may irritate your bladder. Caffeine is found in tea, coffee, chocolate and cola.
- **Try drinking less alcohol.** Alcohol can increase the amount of urine you produce, making it more likely you'll have to get up during the night.

- **Find out your 'triggers'.** Fizzy drinks, citrus fruits like oranges and lemons, tomatoes and spicy foods affect some people. Try avoiding them for a time to see if it helps.
- **Drink plenty of fluids.** Not drinking enough will make your urine more acidic and this may irritate. Aim for 2 litres a day (6-8 cups).
- **Keep a healthy weight and eat a balanced diet.** Your diet should be rich in fibre to avoid constipation. Constipation can put pressure on your bladder and make urinary problems worse. Having weight around the middle (the abdomen) creates pressure like a funnel effect on your pelvic floor area and can make urinary problems worse.
- **Exercise regularly if you can.** Exercise helps you to keep a healthy weight and helps bowel function too. Your doctor can advise you about suitable exercises.
- **Try pelvic floor exercises.** They may help to improve your bladder control. Get advice from your hospital team or a local HSE continence adviser. We also have instructions on our website, www.cancer.ie
- **Go to the toilet regularly.**
- **Wear clothes that are easy to take off.** Trousers with an elasticated waist, or using braces rather than a belt can make it easier when you want to go to the toilet quickly.
- **Try having a rest in the afternoon.** It may help the muscles around your bladder to tighten up and work better for you.
- **Use a bed protector** if you're worried about leaking during the night and wear light pads during the day.
- **Wear dark coloured clothes** if you're worried about urine leaks showing on your clothing.
- **Keep the area clean and dry.** Use a mild soap and gently pat the area dry to avoid skin irritation and stay fresh.

Body image and self-confidence

Cancer and its treatment can cause changes to the way your body looks and works. For example, you may lose your hair, lose or gain weight, or have scarring or a more significant change to your body (for example, losing a body part – such as having your womb or a breast or testicle removed).

Other changes that can affect your confidence include:

- Changes to the way you speak or hear
- Sexual difficulties, such as finding it hard to get or keep an erection or vaginal dryness
- Issues with bladder or bowel control
- Having a stoma
- Infertility

These changes can really knock your confidence and change how you feel about yourself.

If you feel self-conscious or less confident, it can affect many parts of your life – You may feel like you don't want to socialise or travel, it can affect your romantic and sexual relations or you may feel down and depressed in yourself, feel that you don't like your body or feel less feminine or masculine.



Ways to cope

It's important to give yourself time to adjust to the physical and emotional changes you and your body have gone through and to come to terms with your 'new normal'. It's good to talk to someone. Your doctors and nurses, friends and family, other people who've had a cancer diagnosis or a professional such as a counsellor can all help you, if you feel you need support. There are also things you can do yourself.

Feeling better

Be kind to yourself – Try to build up your confidence by focusing on the things you enjoy and taking care of yourself. Give yourself little treats, do activities you enjoy and spend time with people who boost your confidence.

Share your feelings – Telling other people how you feel can help you to come to terms with your emotions and bring a sense of relief. You can talk to friends and family, other people who've had cancer, for example at a cancer support centre or group, or you could talk to a counsellor. The Irish Cancer Society funds free one-to-one counselling at affiliated cancer support centres. See page 81 for more about counselling.

Take care of your body – You may not be able to control the changes in your body or appearance, but taking good care of yourself will help you to feel better, physically and emotionally. For example, getting some exercise, eating well and not smoking can really improve your sense of wellbeing. See page 87 for more about healthy living after cancer.

Be kind to your body – Focus on the positive things that your body can do for you, rather than on the areas where you're having difficulty.

Managing changes

Give yourself time to adjust – In most cases any changes will get easier to manage as you get used to them.

Learn more about the change in your body and things that might help – There are products, treatments and techniques that can improve many changes and make them easier to manage, such as treatments for sexual difficulties, products and treatment to improve urinary problems and techniques for living with a stoma.

You can learn more from reading information from reliable sources, such as www.cancer.ie, talking to your doctor or nurse or counsellor, or speaking to someone else with a similar issue – for example you might like to join a support group, visit a cancer support centre or talk to people in our online community.

Explore techniques, products and classes that can help with changes to your appearance – Look online for cancer beauty and make-up tips and instructional videos. For example, there are products and techniques to help if you've lost your eyebrows or eyelashes and special camouflage make-up to give extra coverage if you have a skin graft, scarring or other skin changes. There are also special clothes to improve your appearance if you have had a mastectomy.

Check out your local cancer support centre – Many have beauty and image sessions or run 'look good' workshops. Getting to know other people with similar issues can help to build your confidence too.

Talk to your medical team for advice on medical matters and if you're struggling to cope with changes.

Your body image and your sex life

Changes to your body can affect your ability to have sex or your desire to have sex. If you have a partner, it's important to try and talk about how you feel and work through problems together. If you don't tell them how you feel they may not understand and feel rejected. You may need to try different ways of being intimate, you may need support from your medical team to deal with side-effects that are affecting your sex life, or you may need to change things to feel more comfortable – for example, having low lighting, staying partially dressed, trying different positions.

If you can't or don't want to have sex, it can be helpful to try and stay physically close, by cuddling, kissing or touching each other. See page 40 for more about sexual difficulties.



Sexual difficulties

While you're having treatment you may not be thinking about your sex life. But once treatment is over you may experience problems that you hadn't expected. These can be physical or emotional. For example, you may feel anxious about having sex again or starting a new sexual relationship. Your self-esteem may be low because of changes to your body like a visible scar or a part of the body being removed, making you feel less confident sexually. This can lead to a loss of desire or confidence to have an intimate relationship with your partner.



Physical and emotional problems that affect your sex life can happen weeks or even months after treatment. These problems are common and there is lots of support available to help you with your sex life, whatever your relationship status.

Tips to cope with sexual problems

- **Don't rush into sex if you don't feel ready.** It may take some time before you feel emotionally and physically ready for sex.
- **Don't be shy to talk to your medical team about your sex life.** There are lots of treatments that can help and there's no need to feel embarrassed – they're used to talking about these things. They can also refer you to other doctors or specialists that may be able to help.

- **Try to work through any problems together with your partner,** if you have one. Keeping the lines of communication open can help to avoid misunderstandings and bad feelings. For example, your partner may feel rejected or take it personally if you don't want to have sex. It can make things easier if you can explain how you're feeling. Try to listen to how your partner feels about everything. They will be affected too.
- **Try to stay close physically.** You may not feel like having sex, or you may not be able to have sex, but you can still be close with your partner. Kissing, hugging and touching each other can help you to feel closer.
- **Ask for help with physical problems.** There are a number of physical changes that can affect your sex life after cancer treatment. For example, hormone therapy drugs may lower your libido (sex drive), some types of surgery and radiotherapy may make having sex more difficult (for example, problems getting an erection or maintaining an erection after prostate surgery, narrowed vagina causing pain and discomfort after pelvic radiotherapy, vaginal dryness after chemotherapy, hormonal therapy or radiotherapy).
- **Let your medical team know if you have any sexual-side effects,** as there are treatments that can help with most problems. There are specialists who can help to restore your ability to get an erection or provide medicine or equipment to help get an erection. Women may need to use vaginal dilators and or creams to help them with pain and discomfort. You need to check with your doctor before using creams as hormonal-based ones are not suitable for everyone.
- **Get professional emotional support if you need it.** One-to-one or couple counselling can help you to work through your emotions and any problems in your relationship. Free one-to-one counselling is available to people with cancer and their loved ones at our affiliated cancer support centres. Call our Support Line for more information. You can also talk to your medical team and ask about support services, such as specialist sexual counselling.

Starting a new relationship

If you're single, you may feel nervous about starting a new relationship. You may worry about when to tell your new partner about having had cancer or feel more self-conscious about showing your body. But as you spend time together and feel more comfortable, your trust should increase and you will know when the time feels right.

The National Cancer Control Programme (NCCP) has booklets for men and women on sexual side-effects after treatment for cancer in the pelvic area and also a booklet for women who've had treatment for breast cancer. Go to www.hse.ie/eng/services/list/5/cancer/patient/leaflets to read or download them.

Pain

Living with pain can have a huge effect on your quality of life. Pain can make you feel depressed and affect your ability to:

- Move
- Work
- Enjoy normal activities
- Sleep

You may experience pain after surgery – you can have pain around the scar area for some time – or as a result of nerve damage from chemotherapy and other drugs (peripheral neuropathy). Others may have pain from tissue damage after radiotherapy.

Some medicines such as long-term hormone therapy can cause joint pain.

Pain in hands or feet

You may get numbness, tingling or pain in your hands or on the soles of your feet after certain types of chemotherapy drugs. This is called peripheral neuropathy. If you have this, you need to be careful as you may not have the same feeling in the tips of your fingers and the soles of your feet. For example, you will need to be

extra careful with sharp objects and hot water. Sometimes, the numbness in your feet means that you have a risk of falling or tripping.

Phantom pain

If you have had an arm, leg or breast removed, you can get a feeling of pain in the part of your body that is missing. This happens because of a mixed signal from the brain or spinal cord that happens quite often after an amputation. Often it is a twisting or burning pain. This is called phantom pain. You need to be careful if you do get phantom pain, particularly if you have an arm or a leg missing, as you may fall or hurt yourself if you have the feeling your arm or leg is still there and try to use them.

Talking about pain

If you have pain at any time, you should tell your doctor or nurse. They can help to identify what is causing the pain and prescribe medication or provide solutions for the pain.



When you are discussing pain with your doctor, it is important to have as much information as you can to help them find relief or a solution for you.

- **Use a number to describe the pain:** 0 meaning you have no pain and 10 for the worst pain imaginable
- **Use words to describe the pain** like stabbing, throbbing, sharp, constant
- **Point out exactly where the pain is**
- **Describe the pattern of the pain-frequency**, how long it lasts, times of day etc
- **Tell the doctor how it affects you.** Can you still work? Can you carry out basic tasks or does it stop you from doing things?
- **Describe how effective your pain medication is.** Does it take away the pain completely or just take some of it away?
- **Keep a diary so you can remember accurately** what your pain is like and how it affects you.

Your doctor may recommend physiotherapy, relaxation techniques, nerve blocks or other types of medication to relieve the pain, depending on how severe it is and what's causing it.

Most types of pain can be controlled with different medicines and treatments.

Tips for coping with pain



- **Take your pain medication regularly as advised**, even if you don't have pain at a particular time. The medication will help to keep your pain under control.
- **If your current medication isn't working to control your pain, tell your doctor or nurse** so they can try something else. They may arrange for you to try out different pain medications to find out what suits you best.
- **Tell your doctor or pharmacist if you're bothered by side-effects.** Some painkillers have side-effects, especially the strong ones. These side-effects may include constipation, feeling sick (nausea) and drowsiness. There may be medication to help.
- **Let your doctor or specialist nurse know if you develop a new pain.**



Trouble sleeping

Sleep problems are not unusual after cancer treatment. They can happen because you're coping with difficult emotions, or because you have side-effects such as pain or hot flushes.

Tips for coping with sleep problems



- **Tell your doctor or nurse if you're having trouble sleeping.** They can give you advice and tell you about any lifestyle changes or medication that may help.
- **If you are feeling depressed or anxious, try talking to your family or close friends about your concerns.** If you find this difficult, ask to see a counsellor. He or she will help you to find ways to cope.
- **If you're taking steroids, try to take them in the morning.**
- **Have a regular routine at bedtime.**
- **Go to bed at the same time every night.**
- **Avoid using electronic devices for an hour before you go to bed.**
- **Take a warm milky drink before bed,** but not coffee or tea.
- **Have a warm bath** with a few drops of lavender oil in it or sprinkle a few drops on your pillow.
- **Listen to music or the radio if you cannot sleep.** Or get up and watch TV or read a book. Wait until you feel sleepy again and then go back to bed.
- **Play relaxation tapes** or use a meditation or relaxation app, to help you fall asleep or get back to sleep.
- **Ask your local cancer support service if they have any groups where you can learn relaxation techniques** such as meditation and mindfulness.

Talking to a counsellor may help if you are feeling anxious or depressed. The Irish Cancer Society funds up to 8 sessions of free, 1-to-1 counselling through our affiliated cancer support centres. Call our Support Line on 1800 200 700 to find out more.

Lymphoedema

Lymphoedema (pronounced lim-fo-dee-ma) is a long-term (chronic) swelling caused by a build-up of fluid in the body's tissues. It can develop if the lymph nodes have been removed during surgery or damaged by radiotherapy or if a cancer is blocking the lymph node. Sometimes it develops some time after treatment has ended.

It occurs most commonly in the arm or breast area after breast cancer treatment or in the leg after treatment to the groin or pelvis. It can also happen in the lower tummy, neck and buttocks area. It is important to look out for the signs and symptoms of lymphoedema and get help early.

Symptoms include:

- Swelling in your arms, hand, fingers or breast. In some situations, the swelling may happen as a result of other things, like infection
- Swelling in your leg, foot, toes, lower tummy, buttocks or genital area
- A tightness with some clothes, shoes, bracelets, watches, or rings
- A full, heavy, achy or weak feeling in the arm or leg
- A tight feeling in the skin. Skin may also be dry, flaky, rough or scaly
- Changes to your skin colour
- Trouble moving your arm or leg

Tell your GP or nurse specialist if you have any unexplained swelling. If necessary, they can refer you to a specialist lymphoedema therapist or physiotherapist who can help you to manage the swelling.

Lymphoedema cannot be cured, but early treatment – when the swelling is soft and easily managed – is always recommended.

With good care and education, lymphoedema can be kept under control. Treatment aims to reduce the swelling and get the limb to function again. Care of your skin is very important to reduce the risk of lymphoedema. Avoiding trauma or cuts to the area affected is a way of preventing lymphoedema.

Go to www.cancer.ie to see our webpage on lymphoedema for more information on how to manage it and stay safe.

Menopausal and hormone-related symptoms

Menopausal symptoms in women

Some cancer treatments such as chemotherapy, radiotherapy, hormone treatment or surgery to remove the ovaries can cause change or stop your periods – either temporarily or permanently. Often periods come back in younger women (under 40), but it depends on the treatment. Some cancer treatments can cause changes in hormone levels and this can cause periods to stop for a time, become irregular or to stop permanently. In some women, treatments can put women into the menopause earlier than would have happened. This can be a difficult time, as many women can struggle with infertility and the inability to get pregnant. It is important to know and understand the signs of menopause. Periods may become lighter at first and eventually stop.

Hormone-related symptoms in men

Some hormone therapies can cause menopausal-like symptoms in men. For example, hormone treatments for prostate cancer or breast cancer.

Symptoms can be severe to mild. They include:

- Hot flushes / night sweats – an intense feeling of heat that comes on suddenly and you can break out in a sweat
- Vaginal dryness for women
- Decreased sex drive
- Mood changes
- Poor concentration
- Aches and pains
- Insomnia (sleeplessness)
- Bone thinning (osteoporosis) – see page 51
- Breast swelling (gynaecomastia)
- High cholesterol

Most menopausal symptoms will eventually pass after treatment, but it can take up to a couple of years for this to happen. Some cancers, for example, endocrine or neuroendocrine cancers, can cause hormone symptoms. If you are worried, contact your doctor.

The best way to cope will depend on your symptoms and what is causing them. For some menopausal symptoms your medical team will be able to help. For example, you may be prescribed hormone replacement therapy (HRT) or bone-strengthening drugs, or your team may be able to recommend vaginal lubricants. For other symptoms, there are things that you can do yourself to improve things:



Tips for coping with menopausal symptoms

- **Relaxation:** Many people find that reducing stress can help make their symptoms less severe. Relaxation techniques like Tai chi, pilates or yoga may help.
- **Complementary therapies:** Therapies such as acupuncture, reflexology, message, meditation, aromatherapy and homeopathic and herbal remedies may help relieve menopausal symptoms for some people. Always discuss complementary therapies with your cancer specialist or GP before starting to check they're safe for you.
- **Counselling:** A counsellor may help if you are suffering with mood changes or having difficulty sleeping.
- **Exercise:** Regular exercise has many benefits – it can improve your mood, help with sleep, keep your weight down (which can reduce symptoms) and keep your bones healthy. There may be special exercise programmes that you can take part in. Call our Support Line to see what's available in your area. It's good to be as active as you can to improve your fitness, bone health and muscle strength. Talk to your doctor about the best exercise for you, how to start exercising and how to build up safely and gradually. There's more about exercise on page 97.
- **Diet:** Eating a well-balanced diet with plenty of fresh fruit, vegetables, especially dark leafy vegetables, nuts, seeds, calcium and fibre can help you to feel as well as possible. Limit the amount of caffeine and alcohol you drink.
Eat foods rich in calcium like milk and cheese and yogurt, which are good for your bone health. Vitamin D helps your body to absorb the calcium. Sunlight helps your body make vitamin D. 5 to 15 minutes of sun exposure on your hands, face and arms 2 to 3 times a week is good for vitamin D production. See page 107 for tips on staying safe in the sun. Egg yolks and fish like salmon, tuna and mackerel also have vitamin D.

Tips for dealing with hot flushes



- **Wear cotton or special wicking-fabric clothing.** Cotton absorbs moisture and wicking fabrics take moisture away from the body to keep you dry and comfortable.
- **Have layers of clothing and bedding** so that you can remove or add layers as your body temperature changes.
- **It may help to avoid certain foods and drinks** such as spicy foods, caffeine, alcohol and hot drinks – try and keep a note of any food or drink that makes your flushes worse so that you can avoid them.
- **Have cool drinks, avoid warm areas,** use an electric fan.
- **Use sprays or moist wipes,** to help lower your skin temperature.
- **Avoid hot baths or showers,** as they may trigger a hot flush.

Effects on your bones and osteoporosis

Hormonal medication and steroids can cause bone and joint discomfort. Some hormonal medications can also cause the bones to become weak and brittle. This is known as osteoporosis. This can also happen with other medications like chemotherapy, which can bring on early menopause. This causes oestrogen levels to drop. A sudden drop in oestrogen levels can lead to premature bone loss, as oestrogen helps the body maintain bone density. Over time there can be a decrease in bone density (osteopenia), which can in turn lead to osteoporosis.

Other treatments like radiotherapy to areas with large bones, for example, your pelvis, can increase the chances of bone fractures as you get older. However, bone strengthening exercises and a healthy balanced diet can reduce the chances of this happening.

After treatment, if your doctor thinks you are at risk, they may organise for you to have a DEXA scan. A DEXA scan looks at your bone density. It will check if it is normal, if you have some bone thinning or if you have osteoporosis.

If you have some bone thinning, your doctor may prescribe some medication to prevent it getting any worse. If you have osteoporosis, or have an increased risk of it as a result of medications the doctor may prescribe medication like an injection or infusion to try to stabilise it and reduce the risk of fractures. Sometimes, if you are starting a hormonal treatment, the doctor may prescribe a calcium tablet and injections to prevent your bones thinning because of the hormones.

There are some things you can do to prevent bone thinning or to stop it getting worse.

- Stop smoking or using tobacco products
- Exercise regularly
- Eat a diet rich in calcium and vitamin D
- Limit your intake of alcohol

The National Cancer Control Programme (NCCP) has a booklet on bone health after cancer treatment. Go to www.hse.ie/eng/services/list/5/cancer/patient/leaflets to read or download it.

Other side-effects

There are other side-effects that you may have after treatment. For example, changes in taste and smell, skin changes and nerve problems, cardiovascular problems, blood clots, hormone system problems. If you have any side-effects that are bothering you, let your medical team know. You can also go to our website www.cancer.ie for a list of possible side-effects and advice on how to cope with them. You can also talk to our cancer nurses. Call our Support Line on 1800 200 700 or visit a Daffodil Centre.

Fertility after cancer treatment

| | |
|------------------------------------|----|
| Fertility after cancer treatment | 55 |
| Checking fertility after treatment | 56 |
| Family planning after treatment | 56 |
| Using frozen eggs or sperm | 57 |
| Infertility | 57 |
| Coping with infertility | 58 |

Fertility after cancer treatment

- Cancer treatments can affect the organs and hormones that help you to reproduce (have children).
- Infertility may be temporary or permanent.
- If your treatment has affected your ability to have children, you may need medical and emotional support.

Cancer treatments can affect the organs and hormones that help you to reproduce (have children).

Infertility can be temporary or it can be permanent. The effect that treatment has on fertility can vary. There are many factors that affect it such as your age, type of cancer, where in the body the cancer was, the type of treatment you had and how long you had the treatment for.



For example, some chemotherapy drugs can stop periods while on treatment and they may or may not return after treatment ends. Hormone treatments in women can affect fertility and some hormone treatments are given for 5-10 years. If you want to become pregnant, you need to talk to your doctor about stopping the hormone treatment. Sometimes, if the chemotherapy or hormone treatment has put you into menopause, it may not be possible to get pregnant.

Men can have a reduced sperm count after treatment or stop producing any sperm at all. This can be caused by chemotherapy, hormonal treatment, surgery or radiotherapy.

Checking fertility after treatment

After treatment, you can have tests to check your fertility. This may be a few months or up to a year after treatment. For women, a blood test can tell how well your ovaries are working and men can have a sperm test. Talk to your doctor or nurse who can organise these tests for you. They may also refer you to a fertility specialist.

Family planning after treatment

If your fertility returns after treatment, deciding when or if to have a baby can be a very difficult decision to make. Talk to your cancer specialist to check that it is safe for you to get pregnant or father a child. They may advise you to wait some time to give you a chance to recover from the effects of treatment and make sure the treatment has been fully successful.

Email: supportline@irishcancer.ie

Using frozen eggs or sperm

If you froze eggs or sperm before your treatment and are thinking about using them, you should talk to your oncologist. They can advise you about when and if this might be possible.

If you're going ahead with using frozen eggs or sperm, you can have treatment at the Rotunda IVF or another fertility clinic. If you want to be treated elsewhere, it is possible for the frozen eggs or sperm to be transferred to a clinic of your choice. However, your clinic must agree to it beforehand and the transfer is done at your own risk.

Where can I get more information?

If you would like more information talk to your doctor or nurse. You can also call our Support Line on 1800 200 700 or visit a Daffodil Centre. Your GP can give you advice as well.

Infertility

Infertility means that you can't become pregnant or father a child naturally without medical assistance. This can be very distressing for you and your partner.



In some cases there may be options for you to explore. For example, adoption, egg donation and fertility treatment. It is important to discuss your options and the timing of any treatment with your doctor. You can also receive specialist counselling to help you with this. Your doctor can refer you to someone who can help you become pregnant or to father a child.

Coping with infertility

It is not easy to hear that your fertility may be affected as a result of cancer. The sense of loss can be painful, no matter what age you are. You might not even have thought about children before your cancer diagnosis. Your reaction can vary from acceptance to shock, sadness and silence to anger and depression. The reality may only sink in when treatment is over. Not being able to have children might make you feel like you have lost a part of your identity – you may feel less masculine or feminine. You may also lose some of your self-confidence.

Support

It can take a while to talk about your feelings and emotions. When you are ready, you may find it helpful to talk openly to your partner, your family or a friend about these feelings.

If you would prefer to talk to someone outside your circle of family and friends, ask your cancer nurse about support groups that may be available. Speaking with people who have had similar experiences can be a great comfort.

You can also ask your doctor or nurse to arrange for you to speak to a counsellor or a specialist, if you cannot deal with any strong emotions that you may have. The Irish Cancer Society also funds free one-to-one counselling through our affiliated cancer support centres.

Practical issues

| | |
|--|----|
| Practical issues | 61 |
| Money matters | 61 |
| Returning to work after cancer treatment | 63 |
| Getting life insurance | 69 |

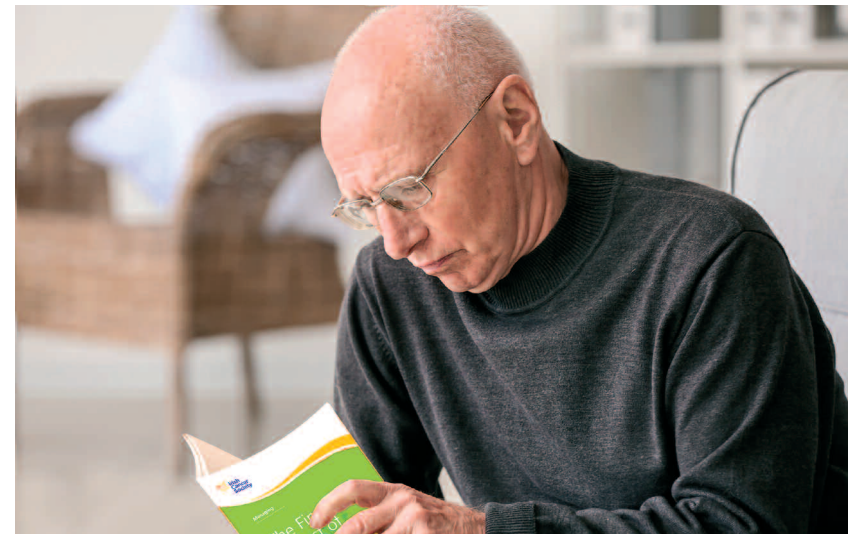
Practical issues

- You may have put practical and financial matters on hold during your treatment.
- Sorting out finances or thinking about going back to work can be a challenge, but help is available.

Money matters

Money worries can cause a lot of stress, on top of other issues you may be dealing with after cancer. Our online booklet *Managing the Financial Impact of Cancer* can help you and your family if you are worried about money. The booklet has information on:

- Benefits you may be entitled to from the Department of Social Protection and the Health Service Executive (HSE)
- Tax relief and waivers
- How to appeal social welfare decisions
- What to do if you are in financial difficulty



Irish Cancer Society Financial Support team

The Irish Cancer Society operates a free information service with information on services and support. To find out more about services and where to get advice about benefits, entitlements and employment issues, call a member of our financial support team on 01 231 0522.

There are also other organisations that can help you through this stressful time:

Citizens Information

Their staff can give very clear information about what you may be entitled to and advise you. They have offices located all around the country and can be contacted at 0761 07 4000. They also have a helpful website: www.citizensinformation.ie

MABS

The Money Advice and Budgeting Service (MABS) is also a very useful service if you find yourself in serious financial trouble and need help to budget and sort out your finances. MABS will meet you to help you make a financial plan. They can be contacted at 0761 07 2000 or by email: helpline@mabs.ie.

Email: supportline@irishcancer.ie

Returning to work after cancer treatment

When you have finished cancer treatment, you may expect to go back to your old way of life and return to work straight away. But everyone reacts differently and some people can feel tired for a year or more after their treatment ends. Your return to work may not happen in the way you expect.

Deciding if you're ready to go back to work

Deciding to go back to work can depend on many different things. For example, your financial situation, the type of work that you do and how well you feel after treatment. Many people are keen to get back to work as soon as possible because it means they are getting back to 'normal' and that they are over their cancer, but it's important to be realistic about what you can and cannot do and not to rush back to work if you don't feel ready.

Cancer can also have a powerful emotional effect. If you have strong emotions, you might need to take a few months after your treatment has finished to adjust to what has happened.

Talk to your doctor

If you think you would like to go back to work, speak to your doctor about whether it's safe for you to return to work. It can depend on the type of cancer you have, the type of treatment you have had and if you still have side-effects from treatment. It may also depend on the type of job you do. For example, you may need more time to recover before returning to a physical or very demanding or stressful job.

Your employer may ask for a letter from your doctor or ask you attend a doctor recommended by them to check that you are ok to return to the job you were doing.

If your doctor doesn't think you're well enough to work, they will give you a certificate so that you can apply for social welfare benefits.

Planning your return to work

If you can, plan to return to work gradually. Talk to your employer, human resource manager or occupational health department. They may have a return-to-work policy that guides the employer and you how to best return to work.

It is best to try to clarify as much as possible with your employer before you return to work so that it goes as smoothly as possible. For example:

- Let them know that you may need some time off. Try to let your employer know in advance if you have hospital appointments.
- If you feel you cannot return to the job that you were doing, you need to discuss this.
- You may want to chat about flexible work arrangements. Examples of this would be returning on a phased basis, starting 1 or 2 days per week or working half days and building up slowly. Depending on your job, you might have the option of working from home.
- It's also best to ensure that you are aware how much you will be paid if you are returning on a phased basis. You may be paid less than you expect and may need to contact your welfare office to discuss a payment to help until you return to work fully.

If you cannot continue working or are self-employed, it may be useful to talk to the Department of Social Protection. You may be entitled to claim certain benefits. You will need a doctor's certificate saying you're not well enough to work in order to claim social welfare benefits.

Most employers will help you to start back to work part-time and build up to full-time hours.

Advice about benefits and entitlements



- Contact the Department of Employment Affairs and Social Protection Information Section Tel: 1890 500 000 / Website: www.welfare.ie
- Ask our cancer nurses – call our Support Line on Freephone 1800 200 700 or visit a Daffodil Centre.
- Call Citizens Information on 0761 07 4000 or call into your local centre. A list of centres is available at centres.citizensinformation.ie



Possible challenges you may face if you go back to work

You may need to adjust your way of working if you still have side effects that are bothering you. For example, fatigue, memory or concentration difficulties, urinary or bowel problems. There's more on coping with different side-effects on pages 19–52.

Tips for managing side-effects at work

- Talk to your employer or supervisor regularly to update them on how you are getting on and if you feel any adjustments need to be made. For example, if you're fatigued you may need to work different hours when your energy is better, or take breaks during the day; if your toilet habit has changed, you might need more or longer breaks; if you have peripheral neuropathy (nerve damage in your hands or feet), it may not be safe for you to do certain jobs.
- Give yourself time to settle back in and don't expect to be 100% well immediately. Remember that most side-effects improve in the weeks and months after treatment has ended.
- Talk to your occupational health adviser if you have one. They have a duty to support you doing your job and help you with any health problems that may affect your work.
- If you have a physical or mental health difficulty / disability on return to work, you are legally entitled to 'reasonable accommodations' in the workplace. Talk to your employer / occupational health department about any specific concerns you have.

Fatigue (tiredness)

Fatigue is a very common side-effect of cancer treatment and it can carry on for months for some people.

Some people find that tiredness is mild and does not interfere with their work. Others find it has a greater impact. For example, you may find it hard to concentrate or make decisions. This can affect the quality of your work. See page 22 for more about coping with fatigue.

Tips for managing fatigue at work



- Talk to your employer about how you can plan and prioritise your work for when you feel less tired.
- Identify aspects of your work that may be too tiring and ask your employer if these can be put on hold or given to another colleague. If necessary, ask about a short-term change of duties.
- Where possible, extend deadlines and ask colleagues to help you with some of your work.
- Keep regular notes to remind you of what work you need to get done that day.
- Keep a diary of your energy levels throughout the day. You may notice that there are times when you are more productive without too much effort.
- Discuss the possibility of flexible working hours, reduced working hours or working from home. Let colleagues know how you will manage your work, how to contact you and when you will check in with them.
- Plan short breaks every now and then so you can rest.

You and your colleagues

It's entirely your decision how and if you talk about your cancer with colleagues. It can be a very sensitive matter, so ensure you are strong enough to do it if you decide to confide in someone. You may decide to tell only 1 or 2 colleagues or you may talk openly about it. It might be a good idea to talk to your employer about your preferences about disclosing your illness so that they can support you.

If confiding in colleagues, you might like to pick individuals you are close to and know how they may react. Keep it simple: there is no need to go into details of treatment.

Allowing your colleagues to understand what you have been through will give them a better understanding of your possible limitations, and an element of patience when you're undertaking certain tasks.

You may find that your colleagues will have different reactions to you when you go back to work. Some people may have no idea what to say and may act like nothing has happened to you. Others may be afraid of hurting you so they will avoid saying anything at all.

Some colleagues may not understand what you have been through – for example, if they have no experience of cancer among their friends and family, they may not be so understanding. Try not to take this personally.

You may not want to discuss your future work plans with your employer and colleagues when you first return to work. Although you may feel ready at the beginning, sometimes people realise that the job they used to do is no longer achievable or enjoyable.

If you're feeling anxious about meeting your colleagues, it might help to meet them for a coffee or a casual catch-up before you return to work. For example, if your physical appearance has changed due to your treatment you might find it easier to meet in a casual setting before you start work.

Getting life insurance

It can be harder to get life insurance after a cancer diagnosis, but it's not impossible.

Your chances of getting life insurance cover depend on the type, stage and grade of your cancer. Most insurers will not offer a policy to someone who is still having treatment for cancer.

The treatments you had, when you finished them and how likely it is that you will recover from your cancer (your prognosis) also affect the insurance company's decision.

It seems there are no definite guidelines when it comes to providing life insurance for people in this situation. Each application is looked at on an individual basis.

When is the best time to apply for life insurance?

It is best to begin your application right away if you are thinking of purchasing a property or want to get life insurance, as it can sometimes take many months. You can ask your insurance company or broker about this.

Where can I get more information?

Read 'Life insurance and cancer' on our website, www.cancer.ie






Your feelings after cancer

| | |
|---|----|
| How you might feel | 73 |
| Fear of cancer coming back (recurrence) | 74 |
| Loneliness | 75 |
| Stress | 76 |
| Anger | 78 |
| Depression and sadness | 79 |
| You and your family | 82 |
| Where to get emotional support | 84 |

How you might feel

- 
- Healing your mind is also part of recovering from cancer.
 - It isn't unusual to feel quite low and lost after your treatment has ended, especially during the first few months.
 - Feelings you bottled up during treatment may hit you afterwards – sometimes months or years afterwards.

After you finish your cancer treatment, it's normal to feel:

- **Afraid of cancer coming back**, worrying about every small symptom
- **Worried about follow-up tests** and investigations and the results of these tests
- **Lonely** without the company and support of your medical team and fellow patients
- **Stressed** at having to deal with things that may have been on hold during your treatment, such as your finances, going back to work and family issues
- **Isolated or guilty** if your family and friends don't understand your feelings or expect you to get back to normal before you're ready
- **Angry** about what has happened and the effect on you and your loved ones
- **Depressed or sad**
- **Lacking in self-esteem** or confidence about your body, especially if your body image has changed since your diagnosis

Healing your mind is also part of recovering from cancer. This may take some time.

Fear of cancer coming back (recurrence)

It's natural to be afraid the cancer will come back. You might worry about every ache or pain. In time, your fears will fade, though they may never go away completely.

What can I do to help myself?

Being well informed and knowing where to go for help and support can help you cope better with your fears.

Learn about your cancer and the possible late and long-term side-effects you may have.

- Know what symptoms to watch out for.
- Communicate with your GP or oncology team and know who to call if you have any questions about symptoms or treatment side-effects.
- Take care of your body and stay healthy.
- Go to all of your follow-up appointments.

Manage anxiety

- Try techniques to help you relax. For example visualisation or meditation can help to reduce anxiety.
- Talk about your concerns with your friends, family, other cancer survivors or your doctor. If you are not comfortable talking about your fears, try writing your thoughts down in a diary.
- Try counselling – we fund free one-to-one counselling sessions through our affiliated cancer support centres. Our cancer nurses can give you more information or see page 81.
- If anxiety is getting the better of you, talk to your doctor so they can support you and recommend things to help.

Loneliness

It can feel like you are on your own after treatment ends because you get less attention and support from your doctors and nurses. It's also normal to feel cut off from other people after cancer treatment. Often, friends and family want to help, but they may not understand how you're feeling or how best to help.

What can I do to help myself?

Even if you are no longer attending the hospital regularly your cancer doctors and GP will still be happy to help you, but there are other sources of emotional support for you:

Local cancer support centres

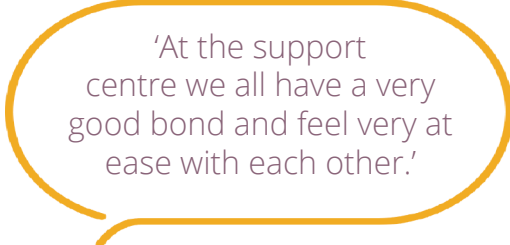
Your local cancer support centre can be a great way to meet other people who understand what you're going through. They have social activities and often run classes like exercise and relaxation classes.

Our cancer nurses

Call our Support Line or visit a Daffodil Centre to talk to a cancer nurse if you need information, advice or just want to talk. You can also email us on supportline@irishcancer.ie

Survivor Support

We can put you in touch with a volunteer who has been through a cancer diagnosis. They are trained to give emotional and practical support to anyone going through or finished with their treatment.



'At the support centre we all have a very good bond and feel very at ease with each other.'

Stress

You may have put worries such as finances, work and family issues to one side during treatment. Now that treatment is over, you may feel overwhelmed by all you have to do.

What can I do to help myself?

Do things at your own pace

You don't have to sort everything out at once. It is important to be patient and kind with yourself.

Write a list

Knowing all the things that need to be done can help you to feel less stressed and can help you to see if you can find people to help you with them.

Take exercise

Being physically active is a great way to reduce stress and can also improve the side-effects of treatment and prevent long-term side-effects. See page 97 for more about getting active.

Release tension

Sometimes releasing tension even for a few minutes can help.

Some ways to release emotions include:

- A good scream
- Having a good cry
- Thumping a cushion or pillow
- Writing things down

Don't worry about what your neighbours will think or say. None of these actions will do anyone any harm. But they may leave you feeling much better.

'Let yourself be how you are ... Happy or sad. What you're feeling is normal.'

Find ways to relax

Relaxation techniques like mindfulness, visualisation or meditation can help to ease your fears and anxieties. Your local cancer support centre may have classes where you can learn these and other relaxation techniques. There are also relaxation and meditation videos online.

Get a hobby or interest

If you have a lot of time to think, it may lead to unwanted stress and anxiety. Sometimes filling this time with a new interest or picking up an old hobby can not only reduce stress levels, but also give you pleasure and enhance your sense of well-being.



'I realised that my feelings and emotions were common ... That other people had gone through a similar situation and I wasn't alone.'

Anger

You may find yourself feeling angry about having had cancer or about things that happened to you during your diagnosis or treatment. You may also feel angry as you adjust to life after treatment and find that it is not as you had expected. Anger can get in the way of you taking care of yourself and moving on if you bottle it up.

What can I do to help myself?

- You may be able to use some of the energy from your anger to your benefit. For example, your anger may motivate you to take action or help you to become clearer about what you do and don't want in your life.
- Express your anger. Start by simply telling yourself and those closest to you that you are angry. Just saying the words 'I am angry' can be a relief.
- If you are holding in your feelings because there is no one you feel you can talk to, you may find it helpful to have some counselling. Free counselling is available through our affiliated cancer support centres (see page 81). Or talk to one of our cancer nurses on 1800 200 700.

'As time has gone on I have learned a way of coping. There is always a fear of the cancer coming back but you just have to learn to cope and be grateful.'

Depression and sadness

It is natural to feel some sadness during and after your illness. You may feel low and not your usual self. If nothing cheers you up and you are feeling low for several weeks, it may be a sign that you are depressed.

Depression can develop slowly or come on suddenly. Depression is more than just feeling sad. It is a significant medical condition that affects thoughts, feelings, and the ability to function in everyday life. It can occur at any time and is more common than you might think.



What can I do to help myself?

It is important to remember that depression can be successfully treated. Talk to your GP (family doctor) about your low moods or strong emotions. Tell the doctor exactly how you feel and focus on what concerns you the most. For example, if you have no desire to get out of bed and wash every day. The doctor will decide what kind of therapy you need and give you advice. If you are unhappy with your diagnosis or the treatment your doctor has advised, you can always get a second opinion.

Tips for expressing your feelings



- Acknowledge any strong emotions. For example, if you feel angry or very sad.
- Describe your feelings rather than simply displaying them.
- Don't feel guilty or 'wrong' about the way you feel – these feelings are normal.
- It's okay to admit that you are uncertain about the future.
- Don't force yourself to speak when you don't want to. You may just want to hold someone's hand or get a hug.
- Everybody has some regrets. Regrets are reduced when they are shared.
- Don't be afraid to cry – it can be a great release.

'My confidence dipped for a time but it has risen since. Leaving the cancer behind ... Feeling normal again!! I feel I've got a new and better life.'

Sometimes your emotions may be too strong to cope with by yourself. Nothing you do or say may seem to improve how you feel. If your emotions prevent you from carrying out normal activities, such as eating or sleeping, or affect the quality of your life, you should ask for help. Don't feel that your emotions are trivial or less important than your physical symptoms.

Above all, don't feel guilty or disappointed if you have to ask for help.

Counselling



If you're feeling very distressed or finding it hard to cope, a trained counsellor who is not involved in your situation can help you to express your feelings, worries and fears and make sense of them. Counselling can also give you emotional support, help you to make decisions and learn ways to cope better.

'Counselling has helped me with every part of my life. I feel I have a future now.'

We fund free one-to-one counselling through some local cancer support centres. To find out more about counselling call our Support Line on Freephone 1800 200 700 or visit a Daffodil Centre. Or email the nurses at supportline@irishcancer.ie

A list of counsellors funded by the Irish Cancer Society is available at www.cancer.ie

'Without counselling, I don't think I would have had such a great recovery or be as positive about my future as I am. I can express my worries and fears. It has made me realise how precious life is and life is for living.'

You and your family

After treatment ends, your family and friends may not be prepared for the fact that recovery takes time. They might expect you to be back to 'normal' much faster than you feel you can be. It can be hard to let them know that you still need their help and support. You may also feel guilty about what your family and friends have been through because of your illness. But you should not let this get in the way of your needs.

Talking to children and teenagers



You may feel guilty if you can't back to normal as quickly as you'd hoped or if you're children expect more from you than you feel able to give. It's best to try and be open with children, as they can often sense that there is a problem. If no one explains to them what's happening, they may imagine something worse or blame themselves. By talking openly you can answer their questions and help them to cope with their emotions. Our cancer nurses can support you if you need help with talking to your children. Call 1800 200 700 or visit a Daffodil Centre.

'My stress has eased and I can deal better with relationships.'

What can I do to help myself and those close to me?

The main thing to remember is that being honest with those close to you really helps. Let your family and friends know that you understand it's hard for them too.

Tell them that you appreciate all they have already done to help you. But you still need their support. As you build your 'new' life with those close to you, things are likely to become easier.

If you find it hard to talk to someone, ask another family member or friend to talk to them.

If you or your family members need more support or advice, get in touch with one of our cancer nurses. Call us on 1800 200 700 or visit a Daffodil Centre. The nurses can also support you if you have children and aren't sure what to say to them.



Where to get emotional support

Find out about cancer support services in your area

Most provide a range of helpful services like counselling, complementary therapies, exercise programmes and other activities. They can also give you practical advice and support.

Join a support or educational group

You may find it very reassuring to talk to other people who are facing similar challenges. Many cancer support centres have activities and groups where you can meet other people affected by cancer.

'I find the centre so supporting and comforting...the amount of services they provide is fantastic. I was so afraid going in at the beginning but now it's my second home.'

Ask about psycho-oncology services at the hospital

Hospital psycho-oncology services give cancer patients emotional and psychological support to help them cope. Your doctor, specialist nurse or medical social worker can refer you to psycho-oncology support services.

Survivor Support

Survivor Support is the Irish Cancer Society's one-to-one support programme. You can be put in contact with a trained volunteer who has dealt with a cancer diagnosis. Volunteers give support, practical information and reassurance. Call 1800 200 700 for more information or visit a Daffodil Centre.

Local cancer support services

The Irish Cancer Society works with cancer support services all over Ireland. They have a range of services for cancer patients and their families, during and after treatment, many of which are free. For example:

- **Professional counselling** (the Irish Cancer Society funds up to 8 sessions of free one-to-one counselling in many affiliated support services)
- **Support groups**, often led by professionals like social workers, counsellors, psychologists, or cancer nurses
- **Special exercise programmes**, like the Irish Cancer Society's Strides for Life walking group programme
- **Stress management and relaxation techniques**, such as mindfulness and meditation
- **Complementary therapies** like massage, reflexology and aromatherapy
- **Specialist services** such as prosthesis or wig fitting and manual lymph drainage
- **Mind and body sessions**, for example, yoga and tai chi
- **Expressive therapies** such as creative writing and art
- **Free Irish Cancer Society publications** and other high-quality, trustworthy information on a range of topics

Cancer support services usually have a drop-in service where you can call in for a cup of tea and find out what's available.

'The Centre has played a huge part in my road to recovery.'

You can call our Support Line on Freephone 1800 200 700 to find your nearest cancer support centre. Or see our online directory at www.cancer.ie/local-support

Get online support

Special websites called online communities let you write questions, share stories, and give and receive advice and support. Join the Irish Cancer Society online community at www.cancer.ie/community

Talk things through

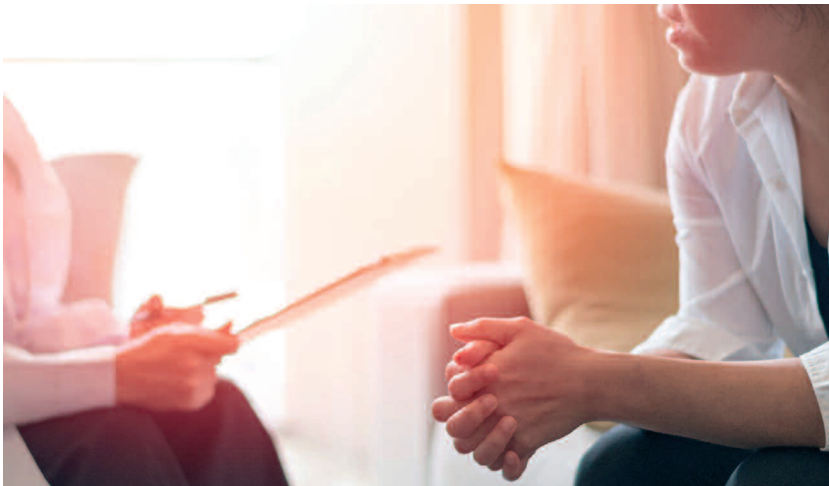
It can be a great weight off your mind to share your feelings and worries. You could talk to a friend or family member if you feel comfortable doing so.

You could also speak to one of our cancer nurses. Or find out about free 1-to-1 counselling funded by the Irish Cancer Society – our cancer nurses can advise you about this.

Seek spiritual support

For some people spiritual and religious beliefs can bring comfort and hope. Practices such as prayer or meditation may help you to focus on what has value and meaning in your life.


If you need more information or help with finding support, call our Support Line on 1800 200 700, email supportline@irishcancer.ie or drop into a Daffodil Centre.



Living well after cancer

| | |
|-----------------------------|-----|
| Living a healthy lifestyle | 89 |
| Be a healthy weight | 91 |
| Eat a balanced diet | 94 |
| Get active | 97 |
| Stop smoking | 101 |
| Avoid alcohol | 102 |
| Protect yourself in the sun | 104 |
| Genetics and family risk | 105 |

Living a healthy lifestyle

- 
- Living a healthy lifestyle can help you to feel as well as possible and reduce your risk of illness in the future, including cancer.
 - Your weight, diet, exercise, avoiding alcohol and tobacco and protecting your skin from the sun are all part of a healthy lifestyle.

After a cancer diagnosis, many people want to live a healthy lifestyle. This includes:

- Being a healthy weight
- Eating a balanced diet
- Getting active
- Stopping smoking
- Avoiding alcohol
- Protecting yourself in the sun
- Getting any screening tests or health checks, vaccinations and other healthcare recommended for you.

A healthy lifestyle can help you to:

- Feel better
- Heal and recover faster
- Cope better with the side-effects of treatment
- Keep up your energy and strength
- Prevent health problems, such as heart disease, lung problems and diabetes.
- Reduce the risk of a second cancer

For some cancers, a healthy lifestyle can lower your risk of the cancer coming back.

'I've learnt to value myself more. I now regularly do things for me which I would never have before.'

Vaccinations



Vaccinations such as the flu vaccine can help to protect your health, but some may not be recommended if your immune system is low or if you are on a particular long-term treatment. Ask your hospital doctor or GP about any vaccinations recommended for you. We have more information on vaccinations on our website www.cancer.ie



Be a healthy weight

Some people find that they put on weight or lose weight during their cancer treatment. Once you have recovered you can think about trying to get to a healthy weight. This is when you are neither overweight nor underweight. Being a healthy weight reduces your risk of cancer, diabetes, high blood pressure, heart diseases and stroke.

Your body may change after cancer treatment and it may not be possible to get back to the shape you were before your cancer diagnosis. You may need to get used to a new normal when it comes to your body shape and size. The most important thing is to be happy in your skin and try and be as healthy as possible.

Getting to a healthy weight

Being a healthy weight is about getting the balance right between what you eat and how active you are. To keep a healthy weight, you may need to change the way you think about food and physical activity for good.

Getting help with your weight

If you need help with becoming or keeping a healthy weight ask your GP or hospital doctor to refer you to a dietitian. They can help you to plan a healthy diet to help you gain or lose weight, depending on your needs.

If you've lost weight during cancer treatment

If you've have lost weight during your cancer treatment, you may need to build yourself up by eating foods that are high in protein and energy (calories). Your doctor can give you advice about this. There more about weight loss on page 26.

Our booklet *Diet and Cancer* also has detailed information on increasing the amount of energy and protein in your diet, along with meal ideas. You can view the booklet online or call the Support Line on 1800 200 700 to ask for a copy.

Keep an eye on your weight and if you continue to lose weight unintentionally, make sure you let your medical team know.

Weight gain

Often people expect that cancer or treatment for cancer will cause weight loss, but you may find that you have gained weight or may have fat in different places. For example, after hormone therapy you may start to carry more weight around your middle.

During cancer treatment you may have been less active than usual, which could also make you gain weight. If you've been inactive you may have lost muscle (called sarcopenia) even if you've put on weight, so it's a good idea to ask your doctor about ways to get active and build up your muscle again.

Some drug treatments such as hormone therapy or chemotherapy can mean your body holds on to more fluid, which can lead to weight gain. This is called oedema. If you have oedema, get advice from your doctor. They may advise you to limit the amount of salt you take or recommend medication. Steroids can also make you put on weight. Once the steroids are stopped, you will have less of an appetite and should find it easier to lose any weight gained.

It is important to try and maintain a healthy weight after your cancer treatment. For some people, maintaining a healthy weight has always been a struggle but after cancer it is really important to try to get to a healthy weight. It will help you to feel as well as possible and reduce the risk of some cancers.

Email: supportline@irishcancer.ie

Tips for for losing weight after cancer treatment



- Eat a balanced diet, with plenty of fruit and vegetables. See page 94 for more about balanced diets.
- Eat wholegrain starchy foods like brown bread, pasta, potatoes (with skins), high-fibre breakfast cereals and brown rice, so you feel full. Try to choose the high-fibre varieties of foods.
- Choose lean meat (beef or pork without the fat, skinless chicken).
- Take low-fat dairy products like low-fat milk or diet yoghurt.
- Avoid sweets, biscuits, cakes and snacks between meals.
- Avoid fried foods. Grill or steam your food instead.
- Get more exercise, if possible. See page 97 for more on getting active.
- Reduce your portion size.
- Reduce snacking, especially after 6pm.
- Talk to your dietitian if you are worried about the amount of weight gained.
- Don't diet without getting the advice of your doctor or nurse first.

If you're finding it hard to lose weight, you can speak to your doctor about meeting a dietitian, who will advise you on a healthy diet to help you achieve this. You can also speak to your doctor about the type of exercise that will suit you and help you to maintain a healthy weight.

Eat a balanced diet

Some people find it takes a little time before they can get back to normal eating. Sometimes your appetite might not be very good or you may find that certain foods irritate you. For example, if your mouth is sore or you have a colostomy or ileostomy. But it's important to eat as well as you can. A well-balanced diet can help you to recover faster, feel well and reduce your risk of illness.



A balanced diet means that you are eating foods that give your body everything it needs to be healthy. This includes protein, carbohydrates, fats, vitamins and minerals. They are used by your body to give you energy, repair and build essential tissues, and help with lots of body functions.

If you've had cancer you may need to eat a special diet or you may need to avoid certain foods. For example, if you have lost a lot of weight you may need to eat more high-calorie foods to build yourself up. If you have an ileostomy, a lot of high fibre foods may make your bowels move too much. The dietitian at the hospital can give you advice if you need to eat a special diet.

Healthy eating guidelines

While some people who've had cancer may need to adjust their diet, for most people the following tips can help you to eat a balanced diet.

- Limit foods and drinks such as cakes, sweets, biscuits and soft drinks as these are high in fat, sugar and salt.
- Try to use fresh ingredients and cook meals from scratch.
- Eat a variety of 5 or more of different coloured fruit and vegetables every day.
- Eat wholegrain breads and cereals, wholewheat pasta and brown rice to give you energy and stop you feeling hungry.
- Choose healthier cooking methods, like steaming, grilling, baking, roasting and stir-frying instead of frying foods.
- Eat more fish, especially oily fish such as mackerel, sardines and salmon, at least once a week.
- Choose lower-fat milks, yoghurts and cheese.
- Choose vegetable oils high in monounsaturated fats such as rapeseed or olive oil.

If you eat a healthy balanced diet, there is no need to take food supplements, unless your doctor tells you to.

'Think what advice you'd give to a friend recovering from cancer and take that advice yourself. We're often kinder to other people than ourselves.'

Preparing food

You may be very tired after your cancer treatment. Don't put pressure on yourself if you don't always feel well enough to cook from scratch – it may take a bit of time for the tiredness to ease. Try these tips to help you to eat well if you don't feel like cooking.

- Prepare meals in advance when you have the energy. Freeze them for when you feel too tired to cook.
- Ask family and friends to help you shop, prepare and cook food.
- Have nourishing drinks when you don't feel like eating.
- Buy **healthy** ready-made meals, frozen meals and takeaways. For example, soup, salads, stir-fries, fish pie, stews, pasta bakes, curries. Look for meals that include plenty of vegetables and protein. Avoid meals with a lot of additives, fat or salt.
- Stock up on healthy snacks. For example, salads, cheese portions, yogurts, nuts and seeds, fruit, baked beans, smoothies, soups.

Tips for buying healthy

Look at the labels when you're shopping. The traffic light system can help – red labels are high in unhealthy foods like fat, salt and sugar, yellow is medium and green is low. Avoid red and go for green!

Each serving (150g) contains

| Energy | Fat | Saturates | Sugars | Salt |
|-------------------|-------------|-------------|-------------|-------------|
| 1046kJ 250kcal | 3.0g LOW | 1.3g LOW | 34g HIGH | 0.9g MED |
| 13% | 4% | 7% | 38% | 15% |

of an adult's reference intake
Typical values (as sold) per 100g: 697kJ/ 167kcal

Get active

Taking some exercise is one of the best things you can do to feel as well as possible. It can:

- Improve fatigue and other side-effects
- Increase your energy levels
- Help anxiety and depression
- Improve your mood and quality of life
- Strengthen your muscles, joints and bones
- Help with coordination, balance and stamina
- Reduce the risk of other health issues
- Improve cancer outcomes

Regular physical activity helps to protect against some types of cancer coming back and other types of cancer developing.

For example, studies have shown that exercising at a moderate intensity for 2-3 hours a week can help reduce the risk of bowel or breast cancer coming back. Moderate exercise is when you are doing an activity that increases your breathing and heart rate and you become warm or sweating slightly.



Starting to exercise after cancer treatment

When you have finished your treatment, your body does need time to recover. Always get permission from your doctor about starting to exercise. They can advise you on when it's safe for you to start and the type of exercise that might suit you. They may also be able to recommend special exercise programmes for people who've had cancer.

Introduce exercise to your daily routine and increase your activity over time.

Start gradually if you have not been taking regular exercise before your cancer diagnosis. Regular exercise usually means 30 minutes of moderate activity at least 3–5 times a week. At this level, your heart rate will increase but you can still talk. You can build up to this gradually and also break up the 30 minutes into three 10-minute sessions.

Doing an activity such as swimming, gardening or cycling for a few minutes every day can help. Recording your achievements in a diary every day can also help you to check your progress. Overall, make sure the exercises are safe, work well and are enjoyable.

Remember: A little exercise is better than none. Even a short walk is a good place to start!

Tips for getting fit

Walking is a super way to get fit for free and it is also a great way to boost your mood. The faster, farther and more frequently you walk, the greater the benefits.

Set yourself some achievable goals, and try to increase the distance you walk every day or every week, while pacing yourself and listening to how your body feels. Your muscles will tell you when you need to ease back or rest.

The website www.irishtrails.ie has details of walking and hiking trails in every county in Ireland and the website www.getirelandwalking.ie gives information on walking groups in your area.

'It took a bit of time to get fit again, but it's possible. Don't feel like you can't – just listen to your body.'

Tips for exercising safely

- Exercise on a flat surface and avoid exercises that might increase your risk of falling or injuring yourself.
- Make sure you drink enough water during and after exercise to prevent dehydration.
- Wear well-fitting, supportive shoes like laced, flat shoes or trainers.
- Consider using the gym. If you are just starting to exercise regularly you may feel more comfortable during off-peak times, when the gym is quieter.
- If you had radiotherapy and had a skin reaction, avoid swimming pools until after your skin has healed. The chemicals in the water may cause an irritation.
- If you get chest pain, dizziness, nausea, difficulty breathing or a racing heart, stop the exercise and tell your doctor.
- Do not exercise if you feel unwell, are breathless, in pain, or have any symptom that worries you. Discuss it with your doctor.
- Avoid high-impact exercises or contact activities if you have bone cancer or osteoporosis (bone-thinning).

Exercising in a group

Exercising with other people can give you support from other people who have had cancer as well as being sociable. It can be fun to exercise with other people and being in a structured group can keep you motivated.

'I have met a lovely group of people and we can laugh and share experiences. It's about getting fitter but the chats after over a coffee are so important too.'

Strides for Life

Some local cancer support centres run physical activity programmes, including a 15-week group fitness programme called *Strides for Life*, which is supported by the Irish Cancer Society.



GP Exercise Referral Programme

This is a 12-week programme to help you develop a physically active lifestyle. Your GP can refer you to a special exercise course if he or she thinks it would be helpful for you. Courses are run in sports and fitness centres all over the country. The courses are run by qualified local coordinators who have completed the HSE national training course.

Ask your medical team for advice about specialist exercise programmes in your area.

Stop smoking

Stopping smoking is the best decision you can make to improve your health and wellbeing.

- It reduces your chance of the cancer coming back and another one developing.
- It reduces your chance of developing other illnesses. These include emphysema, heart disease, stroke and osteoporosis.
- It improves your general health and fitness



There is help available if you smoke and would like to stop. The HSE Quit Team offers support and assistance for smokers. You can talk to a specially trained stop-smoking counsellor who will help you prepare a plan and support you during this time. Call the Quit Team on Freephone 1800 201 203 for more information. You can also Freetext 50100 or visit www.quit.ie

Tips for stopping smoking

- **Pick a day to quit:** Choose a day when you won't be under too much pressure or stress.
- **Throw it away:** On the evening before, throw away all cigarettes, lighters and ashtrays.
- **Stay in control:** Remind yourself that you chose not to smoke and you're in control.
- **Prepare for temptation:** Practise answers if someone offers you a cigarette. "No thanks, I don't smoke."
- **Start a savings jar:** Put in the amount you would normally spend on cigarettes. It soon adds up!
- **Treat yourself:** Reward yourself with a little present or night out.
- **One day at a time!** Don't think too far ahead. Each day without a cigarette is another success.
- **Find a treatment that helps:** Ask your doctor or pharmacist about medications that can help take the edge off the nicotine cravings. There are a range of nicotine replacement therapies, such as gum, inhaler, patch, mouth spray or lozenge, which can be bought over the counter.

Avoid alcohol

Drinking alcohol increases your risk of some cancers, as well as causing other health problems such as strokes and heart problems, liver damage, and inflammation of your stomach or pancreas. Alcohol can also affect your mood and make depression and anxiety worse.

If you're trying to feel as well as possible, physically and emotionally, it's best to avoid alcohol, or at least stay within the low-risk guidelines.

Low-risk guidelines

There is no 'safe' level of alcohol drinking, but the risk to health is lower the less alcohol you drink. You can limit your risk by drinking no more than one standard drink a day if you are a woman and two standard drinks a day if you are a man. A standard drink is ½ pint of beer, lager, cider or stout, 1 measure of spirits or a small glass of wine.



Cutting down tips

- Know how much you're drinking – count your standard drinks for a week to find out.
- Order smaller drinks – a glass or bottle rather than a pint, a single spirit rather than a double.
- Go for a lower alcohol percentage – a shandy or spritzer or alcohol-free beer or wine.
- Try drinking a glass of water between each alcoholic drink.
- Measure your drinks at home rather than free-pouring, so you know how much you're drinking.
- Sip your drink slowly to pace yourself and make it last longer.

For more tips go to www.cancer.ie

Protect yourself in the sun

You can reduce your risk of most skin cancers by protecting your skin from the sun and checking your skin regularly for any changes.

It's very important to protect your skin from the sun if you've had radiotherapy. Once you have had radiotherapy to a certain area of the body, this area will remain sun sensitive forever and will require a total block. Always use a total sunblock on the treated area and use a sunscreen (SPF 30) on non-treated skin.

Seek shade

Stay in the shade when UV rays are at their strongest. In Ireland, this is generally from 11am to 3pm, April to September.

Cover up

Cover up with clothes as much as possible – long sleeves, collars and clothes that cover the legs are best. Avoid flimsy fabrics. Wear a hat that has a wide brim and gives shade to the face, neck, head and ears.

Wear sunglasses

Wear wraparound sunglasses that give 100% UV protection or are CE marked.

Wear sunscreen

Sunscreen alone is not enough. It should be used alongside other protective measures such as clothing and shade. Use a broad-spectrum sunscreen – which gives UVA/UVB protection. For non-treated skin, make sure it has a sun protection factor (SPF) of 30+, high UVA protection and is water resistant. Put plenty of it on dry skin 20 minutes before going outside, especially on areas not often exposed to the sun. Reapply every 2 hours.

Know the UV index

The UV (ultraviolet) index tells us what level of UV radiation is reaching the earth. If the UV index is 3 or more, take extra care. Check with Met Éireann for the daily UV index.

Avoid sunburn and tanning

Skin damage can increase the risk of skin cancer. Never use a sunbed.

Genetics and family risk

When you have finished treatment, you may start to think about your cancer. You may wonder how and why you got it and also start to ask if your family members are at risk of getting cancer too. You may worry that your brothers, sisters or children can get the same cancer. It is important to have a conversation with your doctor about the type of cancer you have to check if it could be genetic or if there is a family risk. It is important to know that most cancers are not passed through families. Around 1 in 20 (5%) are.

You can start by gathering as much information as you can from other family members. Check with relatives in your family to find out who had cancer, what age they were diagnosed at and the type of cancer they had. Your doctor will need all of this information to see if there is a chance your cancer is genetic or has a risk in your family. When your doctor has all the information they can decide if you need to see another doctor with a special interest in cancer and genetics. Your doctor may also ask you to have some bloods test and, depending on those results, your family members may also need blood tests.

It can be scary when you are looking for this information but this can help your family members to prevent that cancer occurring or to make sure it's detected early.


Our factsheet *Cancer and your genes* has more information. Read or download it from our website www.cancer.ie or ask our cancer nurses for a free copy. Visit a Daffodil Centre or call our Support Line.



What if the cancer comes back?

| | |
|--|-----|
| What if the cancer comes back? | 109 |
| Coping emotionally | 109 |
| Types of recurrence | 110 |
| Why does cancer come back after treatment? | 111 |
| Treating recurrent cancer | 112 |
| Clinical trials | 113 |

What if the cancer comes back?

- 
- Modern drug therapies can be very effective at controlling cancer if it comes back (recurrent cancer), and some people live for many years with recurrent cancer.
 - Getting emotional support can be very important in helping you to deal with a diagnosis of recurrent cancer.

Coping emotionally

It can be a terrible shock and hard to deal with emotionally if you find out your cancer has come back again. After having successful treatment, it can be devastating to have to face another diagnosis and overwhelming to try and find the strength to deal with this again. You may also feel less hopeful this time, or have less faith in your medical team.

In time, though, most people come to terms with their diagnosis, even if treatment will be to control the cancer rather than to cure it. Modern drug therapies can be very effective at controlling cancer, and some people live for many years with recurrent cancer. You may also find strength from the coping skills you used and the relationships you built after your first diagnosis.

Support Line Freephone 1800 200 700

Types of recurrence

Local recurrence

The cancer grows again in the same part of the body where you had cancer before.

Regional recurrence

The cancer has spread into a nearby lymph node or tissue.

Distant recurrence

The cancer has spread to a near or distant organ in the body, most commonly the lung, liver, or brain.



Why does cancer come back after treatment?

Your cancer doctors will always do everything to try and get rid of the cancer and reduce the possibility of it coming back again, but sometimes cancer can come back. Cancer can come back weeks, months or years after treatment.

This can happen for a number of reasons:

If you have had surgery

Surgery aims to remove all the cancer from the body. Often you will have chemotherapy and / or radiotherapy to try and destroy any cancer cells that remain. But although the surgeons do their best to remove all of the cancer, sometimes there may be cancer cells left, which are not visible to the surgeon. These are called micrometastases. These can cause the cancer to return.

If you have drug treatment / radiotherapy

Cancer can also sometimes come back after radiotherapy, chemotherapy or other cancer drug treatments. This happens when some of the cancer cells remain active during these treatments and later regrow. In general, treatment doesn't kill every single cancer cell in our body. Our immune system will usually kill off the remainder of cancer cells or they may die naturally, but unfortunately this isn't always the case. This means there's a chance the cancer might re-grow and come back in the future.

Treating recurrent cancer

If cancer comes back, it is often possible to treat it again. Treatment may be:

- To control the cancer and slow its growth
- To help with symptoms
- To cure the cancer. This only applies to some types of recurrence in certain cancers.

Often, treatment is with chemotherapy or other cancer drugs like hormones, biologic or targeted therapy or immunotherapy. These drugs are sometimes called systemic anticancer therapy (SACT). These aim to slow the growth of the cancer for as long as possible. You may need a different treatment from the one used to treat you before. For example, if your tumour has stopped responding well to a chemo drug you had before or if using the same treatment is likely to cause difficult side-effects.

You may also be suitable for a clinical trial, so ask your consultant about this.



Clinical trials



Clinical trials are research studies that try to find new or better ways of treating or diagnosing cancer or reducing side-effects.

Patients with cancer are sometimes asked to take part in a clinical trial. This means that if you're taking part in a clinical trial you may get a new trial drug instead of the standard treatment or you may be given existing treatments used in different ways. For example, giving a different dose of a drug or using two treatments together.

Because the drugs are still in trial, you'll be very closely monitored and may have extra tests and appointments.

Trials often investigate very specific features of a particular cancer or treatment, so you may not be suitable for a trial, even if it is researching your particular cancer. Your doctor can advise you about this.

More information

It's best to talk to your doctor if you're interested in taking part in a clinical trial. For more information, you can read our factsheet *Cancer and Clinical Trials*. It's available to read or download on our website, www.cancer.ie. You can also get a free copy by calling our Support Line on 1800 200 700 or by dropping into a Daffodil Centre.

You can see a list of current cancer trials at www.cancertrials.ie



Irish Cancer Society services

| | |
|---|-----|
| Talk to one of our cancer nurses | 117 |
| Talk to other people who understand what you're going through | 118 |
| Find support in your area | 119 |
| Get reliable information | 120 |

Talk to one of our cancer nurses

Support Line Freephone 1800 200 700

Call our Support Line and speak to one of our cancer nurses for confidential advice, support and information. Our Support Line is open Monday–Friday, 9am to 5pm.

You can email us at any time on supportline@irishcancer.ie

For the deaf community, our Support Line is using the Sign Language Interpreting Service (SLIS) using IRIS. Contact IRIS by text 087 980 6996 or email: remote@slis.ie

Daffodil Centres

Visit our Daffodil Centres, located in 13 hospitals nationwide. The centres are staffed by cancer nurses and trained volunteers who provide free, confidential advice, support and information to anyone concerned about or affected by cancer

Who can use the Daffodil Centres?

Daffodil Centres are open to everyone – you don't need an appointment. Just call in if you want to talk or need information on any aspect of cancer including:

- Cancer treatments and side-effects
- Emotional support
- Practical entitlements and services
- Living with and beyond cancer
- Lifestyle and cancer prevention
- Local cancer support groups and centres

You can email daffodilcentreinfo@irishcancer.ie or visit www.cancer.ie to find your local Daffodil Centre.

Support Line Freephone 1800 200 700

Talk to other people who understand what you're going through



Visit our Online Community at www.cancer.ie/community – write questions, share stories, and give and receive advice and support.

Ask our nurses about **Survivor Support**. You can be put in contact with a trained volunteer who has dealt with a cancer diagnosis. Volunteers give support, practical information and reassurance.

Email: supportline@irishcancer.ie

Find support in your area



We work with cancer support groups and centres and the National Cancer Control Programme to ensure cancer patients and their families have access to high-quality confidential support in a location that's convenient to them. The Society funds professional one-to-one counselling (including telephone and video-call counselling) and group survivorship programmes in communities across the country.

For information about what's available near you, call our Support Line on 1800 200 700 or go to www.cancer.ie and search 'Find Support'.

Support Line Freephone 1800 200 700

Join the Irish Cancer Society team

If you want to make a difference to people affected by cancer, join our team!

Support people affected by cancer

Reaching out directly to people with cancer is one of the most rewarding ways to help:

- Help people needing lifts to hospital by becoming a volunteer driver
- Give one-on-one support to someone newly diagnosed with cancer as part of our Survivor Support programme
- Give information and support to people concerned about or affected by cancer at one of our hospital-based Daffodil Centres

Share your experiences

Use your voice to bring reassurance to cancer patients and their families, help people to connect with our services or inspire them to get involved as a volunteer:

- Share your cancer story
- Tell people about our services
- Describe what it's like to organise or take part in a fundraising event

Raise money

All our services are funded by the public's generosity:

- Donate direct
- Take part in one of our fundraising events or challenges
- Organise your own event

Contact our Support Line on Freephone 1800 200 700 if you want to get involved!

Did you like this booklet?

We would love to hear your comments or suggestions.
Please email reviewers@irishcancer.ie

Irish Cancer Society

43/45 Northumberland Road, Dublin 4

T: 01 231 0500

E: info@irishcancer.ie

W: www.cancer.ie

Support Line Freephone 1800 200 700

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