

## Cancer Awareness – One of Our Patient Participation Groups Personal Experience

### My First Breast Screening,

I had not long turned 50yrs when I received an appointment for breast screening and explanations of what happens in a screening. I decided it was important to go, but I felt nothing was amiss, as I check myself regularly. I went along, to be greeted by a very friendly nurse who explained everything, and reminded me it might be a little uncomfortable but it was only while the scan was taken. The Nurse put me at ease, and 20-30 minutes from when I had arrived I was walking out. I was told the results are posted in about two week's time; also that it may be possible to be recalled for a further scan. I never thought anymore about this – but a few days later a letter did arrive asking me to attend the Glenfield Breast Care Centre. I was concerned about this, but the letter also included details why further tests may be necessary. I went about ten days later, to be greeted by very caring and friendly staff at the Breast Unit. They explained why I needed to have another scan, as the first scan had shown something so a second was necessary. The scan was taken but this time you wait while the scan is assessed. I was sitting waiting when a nurse came to me, and said that I was to see a consultant next. I was now concerned and somewhat anxious. It wasn't long before a nurse accompanied me in to see the consultant. The consultant explained to me that the scans were showing a mass on the x-ray, and because of this he was unsure at this time if the mass was cancerous. I was going to need a further test. He explained I was to have what they called a Core Biopsy – this would be carried out by a doctor using a needle to take small pieces of the lump they had found in the breast. I would have this now. Whilst I was waiting a nurse spoke to me, and asked me if I wanted to talk things over, she would see me after this test if I wanted. Even though I was anxious, I chose not to see her, but she gave me the details of the Breast Care Team, who could be contacted by phone at anytime.

**The Core Biopsy** - the doctor used anaesthetic to numb the area, and a needle was then inserted in the breast tissue. It wasn't really painful more of a sensation; several samples were taken for the lab. I was given another appointment to return in a week's time. The breast was quite a bit tender after and the sites had been dressed. I was told the dressing could be removed the next day. The breast remained a little tender for a day or two. I returned the following week for my results. The consultant explained that the mass looked like a cancerous tumour, and he was still unsure about it. So he needed yet another tests to be done. He apologised that it was taking longer than normal to give me a diagnosis but wanted to be sure before he told me the outcome. He ordered a Stereotactic Biopsy, which he organised straight after I had seen him. Nurses there would make sure you were OK and there was someone about in the Care Team to talk to if you wanted.

**A Stereotactic Biopsy** - you are positioned on a mammography machine that has a special device attached. You are seated for this test; the radiographer takes a scan of the area from two angles. A thin wire is then inserted to mark the position of the tumour; the needle is guided into the right place by this so it can draw off breast cells from the area. Several samples are taken, and then sent for testing. Again your breast is tender and a little bruised for some days after. I had to wait yet another week before I was to finally know. I had thought about things a lot since the first recall, what to do if it was cancer, I had spoken with people I knew who had gone through treatment, I had read leaflets. I was anxious but I thought I was able possibly to make decisions if I was diagnosed with Breast Cancer. The Day came to return, I was extremely quiet and anxious, but I wouldn't let anyone including my husband go with me. I wanted to be on my own. I was called in to see the consultant, who went through things with me. He finally told me the lump was benign and he was happy that he didn't need to remove it. They would compare the scans next time I was due for another routine test... but if I thought there were changes in the breast to go to my GP to be referred back. I was just stunned for words, but so relieved with the result. It had been such a long anxious wait but so worth it in the end, it may have been bad news, but at least then, I would have had a far better chance to beat it. I look at life a little differently after this scare, time is precious.

I am now nearly due to go for a follow up as its approaching three years, so I will be going without fail.

## Cancer Awareness – A GP’s perspective

In 2009 a study showed that the earlier diagnosis of cancer is a national and local priority in healthcare. If we could find out why there are delays in patients recognising and coming to the surgery with early signs of cancer, some 11 400 early cancer deaths would have been avoided each year in England, Scotland and Wales.

The main cancers that we want to pick up earlier are, bowel, lung, cervix, breast, prostate, bladder and skin.

We don’t expect you to know all about each of these cancers, but there are some easy to remember things to look out for. Some of the symptoms of common cancers include

- A persistent cough which lasts for longer than 3 weeks
- A change in bowel movements that last for longer than 4-6 weeks
- Any unusual lumps
- Difficulty in passing urine
- Unexplained weight loss
- Changes to moles or freckles
- A white or red patch in the mouth which doesn’t heal within three weeks
- Unexplained pain
- Feeling very tired all of the time
- Unexplained bleeding

Talking about cancer makes a big difference. We know that when people feel more comfortable discussing cancer, they are more likely to seek help when it’s needed.

It is a myth that getting cancer is simply down to bad luck. Experts believe that up to half the cases could have been prevented by making easy lifestyle changes.

A total of 134,000 cancers in the UK are believed to be caused by lifestyle and environmental factors **each year**.

These don’t stop your chances completely, but can greatly reduce your risk. The four biggest lifestyle changes you can make are; not smoking, keeping active, moderating how much alcohol you drink, and eating five daily portions of fruit and vegetables.

It has been suggested that 10% of cancers may be associated with poor dietary lifestyles.

Taking care in the sun can significantly reduce your risk of skin cancer, especially in the sun in the UK as people don’t often consider protective cream or reducing their risk.

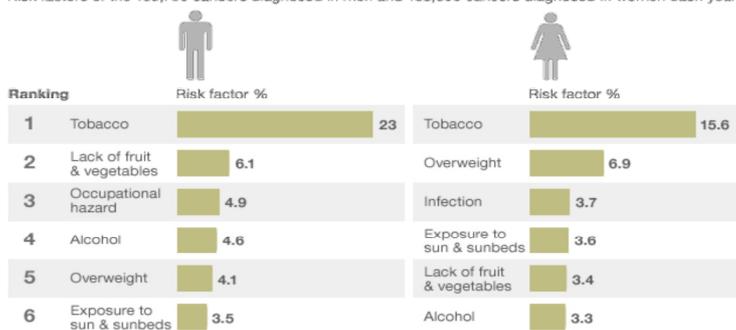
It is never too late to make changes to your lifestyles. Tobacco has the greatest impact, causing 23% of cases in men and 15.6% in women. Stopping smoking at aged 30 will cut your risk of lung cancer almost to that of non smokers. Stopping at 50 can undo half of the damage done.

The next biggest influence is a lack of fresh fruit and vegetables in diets (for men) and being overweight (for women).

A great number more lives can be saved if people with symptoms seek help earlier; treatment is often easier too.

### Top six causes of all cancers in men and women

Risk factors of the 158,700 cancers diagnosed in men and 155,600 cancers diagnosed in women each year



Source: Cancer Research UK