

MACMILLAN
CANCER SUPPORT

THE CANCER GUIDE



As one door closes,
another door opens.
The new door for me
is that I'm getting
a chance in life to
spend more time
with my family
and tell them how
much I love them.

Philomena, diagnosed
with breast cancer,
and her granddaughter



About this booklet

This booklet is for people living with cancer, and their family, friends and carers. It aims to help you understand what cancer means and what to expect. It also explains where you can get more information and support.

Being diagnosed with cancer can be a huge shock. You may be feeling lots of different emotions. But it does not mean you have to give up hope. Many people are now treated successfully or able to live with cancer for many years. There are lots of people and services that can support you.

How to use this booklet

We hope this booklet answers some of your questions and helps you cope with some of the feelings you may have.

This booklet is divided into sections to help you find the information you need. You do not have to read it from start to finish. Different sections may be useful at different times, depending on your situation. You can use the contents list on page 3 to help you.

We recommend that you read this booklet alongside our specific information about the type of cancer you have. You can order this information for free at **be.macmillan.org.uk** or by calling us on **0808 808 00 00**. All of our information is also available online at **macmillan.org.uk/cancerinformation**

Throughout the booklet, we have included quotes from people who have been affected by cancer. Some are from our Online Community (macmillan.org.uk/community) and some are from people who have chosen to share their stories with us. We hope you find these helpful.

On pages 96 to 107, you can find details of how Macmillan and other organisations can help you. There is also space on pages 108 to write any notes or questions you may have for health and social care professionals.

The Macmillan Organiser

If you have this booklet as part of **The Macmillan Organiser**, you can use the **My records** booklet included to write down important information on your diagnosis, treatments, emotions and symptoms. Some people find it a helpful tool to use when talking to their healthcare team.

If you have a copy of **The cancer guide** but not **The Macmillan Organiser**, you can order the rest of the organiser for free. The **Macmillan Organiser** comes in an easy-to-use folder. You can use this to store information and documents relating to your treatment, so that you can keep everything in one place. You can also download the app on IOS or Android.

If you would like to discuss this information, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm. If you are hard of hearing, you can use textphone **0808 808 0121**, or Text Relay. For non-English speakers, interpreters are available. Alternatively, visit macmillan.org.uk

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UNDERSTANDING CANCER

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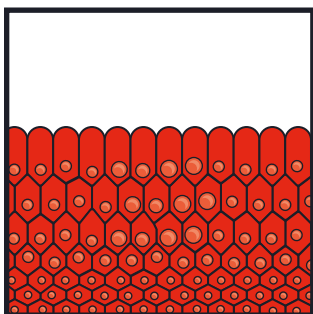
What is cancer?

Cancer starts in cells in our body. Cells are tiny building blocks that make up the organs and tissues of our bodies. They divide to make new cells in a controlled way. This is how our bodies grow, heal and repair. Cells receive signals from the body telling them when to divide and grow and when to stop growing. When a cell is no longer needed or can't be repaired, it gets a signal to stop working and die.

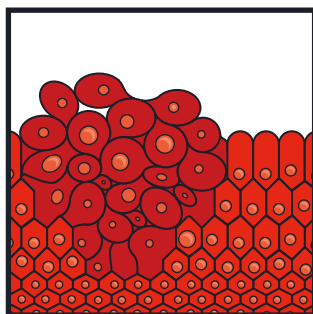
Cancer develops when the normal workings of a cell go wrong and the cell becomes abnormal. The abnormal cell keeps dividing making more and more abnormal cells. These eventually form a lump (tumour). Not all lumps are cancerous. Doctors can tell if a lump is cancerous by removing a small sample of tissue or cells from it. This is called a biopsy. The doctors examine the sample under a microscope to look for cancer cells.

A lump that is not cancerous (benign) may grow but cannot spread to anywhere else in the body. It usually only causes problems if it puts pressure on nearby organs.

Normal cells



Cells forming a tumour



A lump that is cancer (malignant) can grow into nearby tissue. Sometimes, cancer cells spread from where the cancer first started (the primary site) to other parts of the body. They can travel through the blood or lymphatic system. When the cells reach another part of the body, they may begin to grow and form another tumour. This is called a secondary cancer or a metastasis.

Signs and symptoms of cancer

Certain changes to the body may suggest someone has cancer. Common symptoms include:

- a lump or swelling
- unexplained pain
- unexplained bleeding
- unexplained weight loss.

These signs and symptoms do not always mean you have cancer, but you should get them checked by a healthcare professional as soon as possible.

Knowing how your body normally looks and feels can help you notice any early changes that could be caused by cancer. Always see your family doctor (GP) if you have symptoms that are ongoing, unexplained or unusual for you. If it is cancer, the sooner it is found, the more likely it is that treatment will be successful.

There is more information in our booklet **Signs and symptoms of cancer and how to reduce your risk** – see page 96 for details of how to order.

Who can get cancer?

Anyone can get cancer. It affects people from all backgrounds and lifestyles. It is estimated that more than 1 in 3 people will get cancer at some point in their lives.

We do not always know what has caused a cancer. But we know there are factors that can increase or affect your risk of getting cancer. These risk factors include your age and certain lifestyle factors. For example, smoking or eating an unhealthy diet can be risk factors. Cancer is most common in people over the age of 50, but it can happen at any age.

Cancer is very common and most of us have relatives who have had cancer. People often worry that a history of cancer in their family increases their risk of developing it. But fewer than 1 in 10 cancers are linked to a strong family history of cancer. There is more information about this in our booklet **Cancer and genetics – how cancer sometimes runs in families**. See page 96 for details of how to order.

Because cancer affects so many people, there is a lot of support available. See pages 96 to 107 to find out how to get more information and support, for example from local support groups, or from organisations such as Macmillan.

'I was 26, and considered myself young and fit, so to get the news that I had cancer was difficult to deal with.'

Patrick



Who might I meet?

You will meet lots of different health and social care professionals. Some work in your community and look after you at home. Others work in hospitals or treatment centres.

You should be given a main point of contact in your healthcare team. This is often your clinical nurse specialist (CNS). In England, this person is called a key worker. Their name and contact details should be recorded in your case notes and given to you. If you have questions or need advice about your treatment, they will be able to help.

Your community team

Your GP looks after your healthcare while you are at home. They work closely with other members of your healthcare team. GPs can arrange for you to see specialists, and help with any ongoing symptoms and side effects from the cancer and its treatment. They can also:

- help answer any questions you may have
- talk through any decisions you may have to make about your treatment
- talk to family members about your illness (only with your permission)
- talk with you if you are unhappy with any part of your care
- organise services to help you at home.

Community and district nurses work closely with your GP. They are sometimes based at a GP practice, and your GP can contact a local nurse for you. The nurses can visit your home to give you care and support. They can also support anyone looking after you.

Some GP practices have practice nurses, who work alongside the GP. They can help explain things to you and may be involved in taking blood tests, dressing wounds or other areas of your care.

Your hospital team

A group of professionals will work together to manage your care. This is called a multidisciplinary team (MDT). Depending on the type of cancer and how it is treated, your MDT may include the following:

- A consultant – an expert doctor. They are in charge when you are given treatment in hospital. They have a team of doctors working with them.
- A clinical nurse specialist – a nurse who specialises in a particular illness.
- A haematologist – a doctor who specialises in blood problems.
- An oncologist – a doctor who is an expert in cancer.
- A pathologist – a doctor who studies cells and looks at biopsies.
- A radiologist – a doctor who is trained to look at x-rays and scans.
- A therapy radiographer – an expert in planning and giving radiotherapy.
- A surgeon – a doctor who does operations.
- A medical student – someone who is training to become a doctor. They may come around with the doctors who are treating you, so that they can learn.
- A palliative care doctor – a doctor who specialises in helping people cope with the symptoms of cancer.

Many hospitals have specially trained information staff. Some hospitals have local information that is tailored to your needs. They can give you, and your family and friends, information about cancer.

Some hospitals and charities like Macmillan have cancer information and support centres. These offer free information about cancer, and you can talk to staff and volunteers face to face. They can help you get the support services you need. Some centres may be able to offer benefits advice and counselling services. For more information, visit **[macmillan.org.uk/inyourarea](https://www.macmillan.org.uk/inyourarea)**

Social services and voluntary organisations

You may have questions about getting support at home. For example, if you need help with:

- care needs, such as getting washed or dressed
- practical things like shopping or cleaning.

If they think it is appropriate, your GP or a member of your healthcare team may refer you to a social worker to help with some of these issues. A social worker is a professional who can help you and your family with money or work issues, or any other problems. If you have been referred to social services, you can ask them about any practical issues you have. They can also help with financial issues.

You may want to get advice from a benefits adviser. Benefits advisers are sometimes called welfare rights advisers. They can help people get money from the government if they need it. These payments are called benefits. They can also help you apply for grants from other organisations and charities.

There may also be voluntary organisations or charities in your area that could help with practical issues. Speak to your GP or key worker to find out more about these organisations.

Other health and social care professionals

There are many specialists who can provide support and care, during and after you have been diagnosed. They may be based in the community or in the hospital.

These may include the following:

- A counsellor – someone you can talk to about feelings and worries.
- A dietitian – someone who can help you with eating and nutrition.
- An occupational therapist – someone who can help you with everyday tasks, such as washing and dressing, if you are unwell or unable to do things yourself.
- A pharmacist – someone who gives you medicines that have been prescribed, and gives advice about medicines.
- A phlebotomist – someone who takes blood samples.
- A physiotherapist – someone who can help you with walking or moving around, if you have problems with this.
- A psychologist – someone who can help you manage your feelings, if you are finding it hard to cope.
- A speech and language therapist (SLT) – someone who can help with any speech problems you have, or if you are finding it hard to chew and swallow.

Out-of-hours services

There may be times when you need non-emergency medical advice, when the GP surgery is closed. Out-of-hours healthcare services are usually open from 6.30pm to 8.00am on weekdays and all day at weekends and on bank holidays.

There are different services across the UK that can help you during out-of-hours periods:

- In England and Scotland, call **111** – this number is free to call.
- In Wales, call **0845 46 47**.
- In Northern Ireland, visit **nidirect.gov.uk/out-of-hours-service** to find contact numbers.

Sometimes you may be given specific out-of-hours and emergency contact numbers to call. For example, chemotherapy day units will have an out-of-hours number you can call if you need advice or become unwell after treatment.

Getting the most from your appointments

Appointments and other chances to speak with your healthcare team can sometimes feel short. It is good to be prepared.

The following tips may help:

- Plan your questions. Think of any questions you have about your diagnosis, treatment or anything else you are worried about. Write them down before the meeting.
- Write and keep notes. This may help you remember what is said.
- Ask a friend or family member to come with you, if you can. They may be able to take notes, or remind you of what was said, after the appointment.
- Do not feel you have to ask everything at once. You will have lots of chances to ask questions.
- Remember that professionals are there to help. They are very likely to have helped people with similar issues before, even if it is something you find embarrassing to ask about.

If you have a **Macmillan Organiser**, you can use pages 20 to 29 of the **My records** booklet to plan your questions and keep appointment notes. You can also use pages 12 to 19 to record the contact details of key members of your healthcare team. You can order a copy of the organiser from **be.macmillan.org.uk**

You may find our leaflet **Ask about your cancer treatment** helpful. It suggests questions you can ask your healthcare team, to help you understand your diagnosis and treatment options. See page 96 for details of how to order.



If you are a partner, relative or carer

A carer is someone who provides unpaid support to a family member or friend who would not be able to manage without this help. Caring can mean many things, including helping with personal care, providing transport, being a good listener or helping with everyday chores.

Understanding more about cancer could help you support the person you are close to. Health and social care professionals, including the key worker, are there for you too. With permission from the person with cancer, you can ask the healthcare team any questions you might have. This includes questions about your caring role.

You can call our support line on **0808 808 00 00** for details of local and national support for carers. We also have information in our booklet **Looking after someone with cancer**, which is written by Macmillan and a group of carers. See page 96 for how to order. Or you can read our information for carers by visiting **[macmillan.org.uk/carers](https://www.macmillan.org.uk/carers)**



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How cancer is diagnosed

Some people are diagnosed with cancer after their GP refers them for tests. Others are diagnosed after going into hospital for another health problem, or because a symptom gets so bad that it becomes an emergency. In general, the earlier a cancer is diagnosed, the better the chances of treatment being successful.

GP referral

If your GP thinks you may have cancer, they will make an urgent referral for you to see a specialist. This means tests should be arranged quickly.

GPs may also make a non-urgent referral. Non-urgent referral times can vary. This depends on where you live and what type of medical problem your GP thinks you have.

Having tests and scans

Healthcare teams use different tests and scans to find out if you have cancer. The tests also help give more information about the cancer. They may include:

- a biopsy – where a small piece of tissue is removed and looked at under a microscope to check for cancer cells
- blood tests – to check your general health, check for infections and help diagnose cancer
- scans and x-rays – to look for signs of cancer inside your body.

There are many different types of tests and scans. The tests and scans you have will depend on the type of cancer and your situation.

After you have been diagnosed, your cancer specialist will often want to do further tests. This may include tests to find out the stage of the cancer. The stage of a cancer usually means how big it is and whether it has spread from where it first started. Knowing more about the cancer helps doctors advise you about the best treatment for you.

Waiting for test results

Waiting for test results can be a difficult time. It may take from a few days to a couple of weeks for the results of your tests to be ready. You may find it helpful to talk with your partner, your family or a close friend. Your specialist nurse or one of the organisations listed on pages 101 to 107, can also provide support. You can also talk things over with one of our cancer support specialists on **0808 808 00 00**.

Your feelings about being diagnosed

When you are first diagnosed with cancer, the fear of what might happen next is sometimes the only thing on your mind. You may feel sad, frightened or angry.

It is natural to have many different thoughts and feelings after a cancer diagnosis. But there are things you can do to help you accept your diagnosis (see pages 72 to 76). As time goes by, many people find they start to get some control back in their lives and can carry on with their usual activities.

If you have a family member or friend with cancer, you may also need support.

We have more information about coping with difficult emotions – see pages 66 to 71.

Your data and the cancer registry

When you are diagnosed with cancer in the UK, some information about you is collected in a national database. This is called the cancer registry. It helps the NHS and other organisations plan and improve health and care services. Your hospital will give information about you, your cancer diagnosis and treatment to the registry automatically, unless you ask them not to. As with all medical records, there are strict rules to make sure the information is kept safely and securely. It will only be used for your direct care or for health and social care planning and research.

Talk to your doctor or nurse if you have any questions about the registry. If you do not want your information included in the registry, you can contact the cancer registry in your country to opt out. You can find more information at **macmillan.org.uk/cancerregistry**

What happens next?

Your healthcare team will talk to you about your treatment options and when treatment will start. They can also talk to you about any support you need.

If you were referred urgently by your GP, your hospital team will aim to start treatment as soon as possible. This will be one of the following periods of time:

- within 31 days of you being diagnosed and deciding to start treatment
- within 62 days of the referral by your GP.

They will aim for whichever one of these is sooner.

Not all cancers need treatment straight away. Some types of cancer are very slow-growing and unlikely to cause any problems for many years. If you are in this situation, you will be closely monitored. If there are signs that the cancer is beginning to progress, your healthcare team will discuss your treatment options with you. In these cases, delaying treatment until it is needed helps to avoid the potential side effects that it may cause.

If you have a **Macmillan Organiser**, you can use pages 38 to 42 of the **My records** booklet to record your diagnosis and any updates to your diagnosis.

Checklist for transport

You may need to travel to a hospital for appointments and treatment. It is good to have a plan in place for how you will get there. You might find it helpful to use this checklist to make sure you can get there and back easily:

- If you can, ask family or friends if they can drive you to and from the hospital.
- If you have problems with mobility and using public transport, you may be able to get a Blue Badge. A Blue Badge allows you, or the person driving you, to park in parking spaces that are closer to where you need to go.
- If you are worried about getting to the hospital, ask your GP or nurse about other options. They may be able to arrange a volunteer driver.
- If you are travelling to the hospital on public transport, ask your transport provider about discounts. There are special rates for bus, coach and train travel for eligible older people and people with disabilities.
- Ask at the hospital if they can help with travel and parking costs.
- Travel safely. If wearing a seatbelt is uncomfortable, there are comfort aids that can help. If you cannot wear a seat belt for medical reasons, you can get a medical exemption certificate from your doctor.

PATIENT'S
CROCKERY
& ADAPTIVE
CUPS



TREATING CANCER

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How cancer can be treated

The aim of treatment is to cure the cancer, or control it and relieve its symptoms.

The type of treatment you have will depend on the cancer and your situation. You may have more than one treatment.

Cancer treatments can include:

- surgery – the cancer is removed in an operation
- radiotherapy – high-energy x-rays are used to destroy cancer cells
- chemotherapy – anti-cancer drugs are used to destroy cancer cells
- targeted therapies (sometimes called biological therapies) – these interfere with the way cancer cells grow
- hormonal therapies – these change the activity of certain hormones in the body, which can slow down or stop cancer from growing.

You may have a combination of these treatments. This is quite common. We have more information on treatment types. See page 96 for details of how to order it.

It is important to discuss your treatment options and what they may involve with your healthcare team. For example, cancer treatment does not always mean staying in hospital. It may just mean visiting a hospital regularly.

Some people find that learning more about their treatment helps them feel prepared. It can also help you to plan any questions you want to ask. For example, you may want to ask how you are likely to feel during and after treatment.

You can ask your healthcare team any questions you have. They are there to support you. We have more detailed information about cancer types, treatments and any side effects treatments may cause. To order, visit **be.macmillan.org.uk**

If you are a carer, finding out more information can also help you plan ahead. You can think about any extra help that you and the person with cancer might need, during and after treatment.

Clinical trials

You may be asked to take part in a cancer research trial (clinical trial). Research trials try to find new and better treatments for cancer. Trials that involve patients are called clinical trials.

If you decide not to take part in a trial, your decision will be respected and you will not have to give a reason.

There is more information in our booklet **Understanding cancer research trials (clinical trials)**. To order, see page 96.

Making treatment decisions

You may have a choice about which treatment you have. Your doctor will discuss these options with you. Treatment can be given for different reasons. The potential benefits will depend on your situation. Your doctor can tell you if the aim of treatment is to cure the cancer, to control it, or to reduce symptoms and improve your quality of life.

If two treatments are equally effective for the type and stage of cancer you have, your doctors may offer you a choice. They can help you choose the best treatment for you. It is important to understand what each treatment involves and the possible side effects, before you decide what is right for you.

The benefits and disadvantages of treatment

You will normally have time to consider the options and have another appointment to discuss your decision. You may find it helpful to discuss the benefits and disadvantages of each option with your doctor, specialist nurse, key worker, or with our cancer support specialists on **0808 808 00 00**. We can also send you our booklet **Making treatment decisions**, which you might find helpful. To order, see page 96.

It can help to make a list of the questions you want to ask. If you can, you may want to take a family member or friend with you when you see the doctor again. Take notes about what has been said so you can refer back to them afterwards. If you have a **Macmillan Organiser**, you can use the notes pages in the **My records** booklet to do this.

In some situations, the impact of side effects could outweigh the benefits of the treatment. Your healthcare team will discuss this with you in detail. If you decide not to have the treatment, your healthcare team will make sure you are as comfortable as possible. They will also try to reduce any pain or symptoms.

Treatment side effects

Different types of cancer treatment can cause different side effects. Your healthcare team will give you detailed information about any side effects you might have.

Side effects can often be reduced and managed. The team treating you will also try to reduce your chance of getting them. For example, they may give you anti-sickness medication if they know you may have nausea and vomiting from your treatment. Or they may advise you about ways to be more active if they know that tiredness (fatigue) is a side effect of your treatment.

If you need to, you may see other healthcare professionals. For example, you may see a dietitian if you are having problems with eating, or a lymphoedema specialist if lymphoedema is a possible side effect of treatment. Lymphoedema is a condition that causes swelling in the body's tissues.

Most side effects gradually go away after treatment finishes. Some people have long-term or late effects after treatment. Your healthcare team can help with these too.

Contact your healthcare team if you are worried about any side effects.

Coping with changes to your body

Sometimes cancer treatment can affect parts of your body and how they look. For example, chemotherapy can cause hair loss. Some of these changes can be temporary, while others may be permanent.

Body changes can sometimes be difficult to accept. Your healthcare team can help you cope with this.

There is more information in our booklets **Body image and cancer**, **Feel more like you** and **Coping with hair loss**. See page 96 for details of how to order them.

'It's the uncertainty when they tell you what side effects you might get. But many people get very few side effects, and some get none at all. Think of this as a short period of treatment to make things better in the long run! I know it's not easy.'

Mark

Giving your consent

Before you have any treatment, your doctor will explain its aims. They will usually ask you to sign a form saying that you give permission (consent) for the hospital staff to give you the treatment. No medical treatment can be given without your consent, and before you are asked to sign the form you should be given full information about:

- the type and extent of the treatment
- its advantages and disadvantages
- any significant risks or side effects
- any other treatments that may be available.

If you do not understand what you have been told, let the staff know straight away, so they can explain again. Some cancer treatments are complex, so it is not unusual to need repeated explanations. It is a good idea to have a relative or friend with you when the treatment is explained, to help you remember the discussion. You may also find it useful to write a list of questions before your appointment.

People sometimes feel that hospital staff are too busy to answer their questions, but it is important for you to know how the treatment is likely to affect you. The staff should be willing to make time for your questions.

You can always ask for more time if you feel that you can't make a decision when your treatment is first explained to you.

You are also free to choose not to have the treatment. The staff can explain what may happen if you do not have it. It is essential to tell a doctor or the nurse in charge, so they can record your decision in your medical notes. You do not have to give a reason for not wanting treatment, but it can help to let the staff know your concerns so they can give you the best advice.

Second opinion

Your multidisciplinary team (MDT) uses national treatment guidelines to decide the most suitable treatment for you. Even so, you may want another medical opinion. If you feel it will be helpful, you can ask either your specialist or GP to refer you to another specialist for a second opinion.

Getting a second opinion may delay the start of your treatment, so you and your doctor need to be confident that it will give you useful information. If you do go for a second opinion, it may be a good idea to take a relative or friend with you, and have a list of questions ready, so that you can make sure your concerns are covered during the discussion.

Private healthcare

You may choose to pay for private healthcare. Private treatment for cancer is mainly offered by private hospitals and clinics. But some specialist NHS hospitals also treat private patients.

You can pay for treatment with private health insurance, or you can self-fund. This means you pay the hospital or clinic directly.

Living well during and after treatment

Your healthcare team can offer you different types of support. But there are also things you can do yourself to feel better. Making some lifestyle changes and recording how you feel can help you feel more in control of your situation.

Prepare for life at home

Thinking about how you will manage around the house when you are unwell can help when you have a lot to think about. It is a good idea to plan ahead to try to minimise any problems. You might find it helpful to use this checklist of things to do before, during and after treatment:

- Let your friends and family know that you may need their help with things around the house during treatment. Do not be afraid to accept their help.
- If you have a child, look at options for childcare. Tell the school or nursery so they can support you and your child.
- If you have a pet, look at options for pet care. We have more information on our website – visit **macmillan.org.uk**
- Arrange for someone to water your plants if you are going to be in hospital for some time.
- Plan to do your grocery shopping at the times you are most likely to feel well. Online shopping may be a good option if you are feeling unwell. Make sure you have lots of easy-to-prepare meals. And prepare food in advance and freeze it.
- Keep a diary to help you track your energy levels and plan around them. Always ask for help if you need it.



A dosette box

Keep a treatment record

You may find it useful to keep a record of which treatments you have had so that you can refer back to it if you need.

Your treatment may be medication that you take on a regular basis. Or you may be prescribed medication to help with side effects. You might have to take several types of medication at one time. It can sometimes be difficult to remember what each of your medicines are for and any special instructions for taking them. Writing these things down will help you remember.

You might find it helpful to use a dosette box to keep your tablets in (see opposite). This is split into sections to keep your medicines in. These sections are labelled with the days of the week and sometimes the time of day. They help you know which medicines to take when.

It can also be a good idea to write down your symptoms and side effects and how severe they are. This can help you see whether they are getting worse or improving. You can show this to your healthcare team to see whether the doses of any of your medicines need changing.

If you have a copy of the **Macmillan Organiser**, you can keep a record of your medicines in the **My records** booklet – see pages 55 to 63.

Eat well

When you have cancer, you may find you need to change your diet. The cancer or its treatment may have caused you to lose or gain weight. Or you might have a specific problem that makes eating difficult.

Making changes to your diet is not always easy. It may be more difficult if you are coping with cancer and having treatment. You could try making changes gradually, or eat small amounts often. Talk to your doctor or nurse. They can refer you to a dietitian, who can help you if you are struggling to eat or have lost your appetite.

If you have a **Macmillan Organiser**, you can use pages 84 to 85 of the **My records** booklet to write down what you think helps your appetite and what does not.

We have more information in our booklets about eating well:

- **Healthy eating and cancer**
- **Eating problems and cancer**
- **The building-up diet**
- **Managing weight gain after cancer treatment**
- **Recipes for people affected by cancer.**

See page 96 for details of how to order.



Be active

Fatigue is a very common problem for people with cancer. Fatigue means feeling very tired or exhausted all or most of the time. The tiredness is not helped by rest, and it can affect you physically and emotionally. It may be caused by the cancer itself or the symptoms caused by the cancer. It can also be a side effect of treatment.

Fatigue affects everyone differently. Doing some physical activity each week might help you feel a bit better. Even just spending less time sitting down and taking short walks can help. Resting afterwards will help you save energy.

Being active has many benefits. It can help to:

- reduce tiredness and some treatment side effects
- reduce anxiety and depression
- improve your mood and quality of life
- strengthen your muscles, joints and bones
- keep your heart healthy and reduce the risk of other health issues.

It can also be helpful to keep a record of your energy levels on different days to share with your healthcare team. If you have a **Macmillan Organiser**, you can use the fatigue diary in the **My records** booklet.

There is more information in our booklet **Coping with fatigue (tiredness)** – see page 96.

Give up smoking

If you are a smoker, choosing to stop will benefit your health. Smoking increases the risk of several types of cancer. It can also lead to heart and lung diseases. If you are coping with a cancer diagnosis, you may find it stressful to give up smoking. However, research has shown that non-smokers have fewer side effects during cancer treatment. If you are ready to stop, giving up smoking will help you feel better and be healthier.

Health and social care professionals, such as your pharmacist or GP, can help if you are trying to give up smoking.

Our booklet **Giving up smoking** has practical advice about how to stop smoking and stay stopped. See page 96 for details of how to order.



After treatment

You may not need any more treatment because the cancer has been cured. Or you may be living with cancer, with the possibility that you will need more treatment in the future.

When your treatment comes to an end, it is important to give yourself time to adjust to any physical or emotional changes. Many people survive cancer. But the treatment can be very hard on the body and it may be some time before you feel fit and well again.

You may find it helpful to read our booklet **Life after cancer treatment**. For details of how to order it, see page 96.

Follow-up care and support

After your treatment is over, you may have regular check-ups. Depending on your situation, you might need to have scans or x-rays. Your cancer specialist or clinical nurse specialist will explain how often you will need to see them. Many people find they get very anxious before their appointments. It may help to get support from family and friends. Or we have a list of organisations you can get in touch with – see pages 101 to 107.

If you have any problems or notice any new symptoms between check-ups, let your doctor know as soon as possible.

Late effects of treatment

Most people have some side effects during and after cancer treatment (see pages 31 to 32). These effects usually gradually get better and go away. But some people may have side effects that last for months after treatment and sometimes become permanent. Other people may develop effects of treatment months or years later. These are called long-term or late effects.

There are many things that can be done to manage or treat late effects. It is important that you do not feel you have to tolerate them.

Always let your cancer doctor or nurse know if side effects that you have developed during treatment are not going away. You should also tell them if you develop new symptoms or problems after treatment is over.

People sometimes worry that their symptoms are caused by the cancer coming back. Your doctor or nurse will be able to reassure you. They will arrange for your symptoms to be checked if necessary.

Not everyone gets late effects, and many get better over time.

Worrying about cancer coming back

Many people worry that the cancer will come back. Feeling like this is natural. As time goes on, most people become less worried about this. The risk also goes down over time. If cancer does come back, it often happens within a few years of treatment finishing. It may help to talk to your cancer specialist or key worker about the risk of your cancer coming back.

If you are worried about any unexplained symptoms, particularly any that last for more than a week, get them checked by your GP.

Our booklet **Worrying about cancer coming back** has more information. See page 96 for details of how to order.



If the cancer cannot be cured

Some people live for many years with cancer that cannot be cured but can still be treated. You might reach a stage where there are no more treatments available to control the cancer. It can be very difficult to hear you may be reaching the end of your life.

You can talk to your healthcare team, carer, partner, family or friends about how you would like to be cared for towards the end of your life. Together, you can make a plan for your care.

Your doctor might refer you to a specialist palliative care team or specialist palliative care nurse. Palliative care is treatment that aims to reduce symptoms, such as pain or tiredness. It can also give emotional, social and spiritual support to you and your family. Palliative care does not aim to cure the cancer, but it can help give you the best possible quality of life.

We have more booklets that you might find helpful:

- **Coping with advanced cancer**
- **Caring for someone with advanced cancer**
- **Your life and your choices: plan ahead**
- **End of life: a guide.**

See page 96 for details of how to order.



ORGANISING

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Your rights

Most people are happy with the treatment and care they get from healthcare professionals. If you feel there is a problem, it is important to know what your rights are.

Being involved in decisions

You have the right to be involved in decisions about your care. This includes the right to:

- understand all your treatment options, and their risks and benefits
- see your medical records
- decide which treatment you wish to have.

Confidentiality

You have the right to expect that your information will be kept confidential, unless you give permission for it to be shared.

If you think your information has been shared without your permission, you can make a complaint to the organisation involved. If you are unhappy with the response, contact the Information Commissioner's Office at **ico.org.uk**

Good health and social care

If the cancer and treatment mean you cannot live as independently as before, you have the right to have your needs assessed by your local council. This is called a community care assessment. It is done by a community support officer. Some officers are based in hospitals, so they can assess you while you are there.

Discrimination

You have the right not to be discriminated against because you have cancer. You are protected by:

- the Equality Act 2010 if you live in England, Scotland or Wales
- the Disability Discrimination Act 1995 if you live in Northern Ireland.

These laws also protect against discrimination at work. If you think you are being discriminated against, contact Citizens Advice (see pages 104 to 105).



Complaints

If you have a problem with your healthcare, you have the right to make a complaint. If your complaint is about your GP or NHS Trust, you can make a complaint to the NHS. The NHS must respond to your complaint and keep it confidential. The way to do this depends on where you are being treated. Citizens Advice has information on how to complain to the NHS service in your area – see pages 104 to 105 for contact details.

You also have the right to make a complaint if you feel your social care is not as good as it should be. To make a complaint about social care, contact your local council or service provider.

You can also make a complaint about your health and social care to your local public services ombudsman:

- If you live in England, contact the Local Government and Social Care Ombudsman at **lgo.org.uk**
- If you live in Scotland, contact the Scottish Public Services Ombudsman at **spsso.org.uk**
- If you live in Wales, contact the Public Services Ombudsman for Wales at **ombudsman.wales**
- If you live in Northern Ireland, contact the NI Ombudsman at **nipso.org.uk**

Getting enough information

You should be given enough information about the cancer and your treatment and care. This includes the right to:

- have your treatment options and side effects explained in words you understand
- be offered written information that is easy to understand and specific to you
- be offered an interpreter if English is not your first language
- ask family members or friends to attend appointments to help you understand what you are told.

If you are a partner, relative or carer

If you are looking after someone with cancer, you have a right to a carer's assessment from your local council. This means a social worker can assess your needs, decide what support they can offer you, and agree a supportive care plan with you. They may be able to arrange help with caring for the person you are looking after. They may also be able to give you breaks from caring from time to time.

If the person with cancer has given their permission, you have the right to be given information and advice about any support they need. If the person has given their permission, you also have the right to be involved in decisions about their treatment and care plan.

You can speak to any member of your healthcare team about your rights. Or you can call the Macmillan Support Line on **0808 808 00 00** to talk to a cancer support specialist.

Our booklet **Looking after someone with cancer** has more information and support for carers. To order, see page 96.

Work

How cancer affects your work life depends on different things. These include:

- the type of cancer you have
- your treatment and its side effects
- the practical support you have at home and work
- your finances.

Some people stop working during treatment and for a while afterwards, until they feel ready to go back. Other people continue working, sometimes with reduced hours or changes to their job. Getting back into your normal routine can be helpful. Talk to your employer about your options. It is important to do what is right for you.

If you are self-employed, you may not have colleagues to support you. You may not be paid a salary while you have treatment. But being self-employed could mean you have more opportunity for flexible working. You may also be entitled to support and benefits.

Knowing more about treatment and its possible side effects can help you make decisions about work. Your consultant, GP or specialist nurse can advise you.

Employment rights

You are protected by:

- the Equality Act 2010 if you live in England, Scotland or Wales
- the Disability Discrimination Act 1995 if you live in Northern Ireland.

Even if you had cancer in the past and have been cured, you are still covered by the Act. This means your employer must not discriminate against you for any reason, including the past cancer.

These laws also say employers must make 'reasonable adjustments' to make sure you are not at a disadvantage because of the cancer. This can mean different things, depending on your work and the situation. For example, it could mean changing the tasks you do or your working hours.

People who are working and caring for someone with cancer are also protected from direct discrimination and harassment in the workplace. Carers have the right to take unpaid time off work for people who depend on them in an emergency. They also have the right to request flexible working from their employer.

Checklist for work

You may need to take time off work during your treatment and for a while afterwards. Having the right kind of conversations with your employer can help you set expectations at work. You might find it helpful to use this checklist to help you plan ahead:

- Ask your doctor how your ability to work will be affected by cancer treatment.
- Check your company's guidelines and sickness policies.
- Plan your finances. Check to see if you are eligible for sick pay or benefits, including Employment and Support Allowance.
- It is a good idea to tell your employer you have cancer, so they can support you. Explain how it is likely to affect your work. If you do not know, tell them that.
- Talk to your employer about making reasonable adjustments to help you continue working or return to work. This includes:
 - time off for treatment
 - changes to working hours
 - extra breaks to help you cope with side effects like tiredness.
- Ask your employer to keep the information you give them confidential. Only the people you agree to have information should be told.
- If you are taking time off work, agree a communication plan with your employer that you are happy with. For example, you might agree on a phone call every 2 weeks. And make a flexible return-to-work plan with your manager.
- If you are off sick for more than a few days, ask your doctor for a fit note. You need a fit note to get sick pay and claim benefits.

We have lots more information about work and cancer, including information for people who are self-employed or carers. You might find the following booklets helpful:

- **Work and cancer**
- **Self-employment and cancer**
- **Questions to ask about work and cancer**
- **Working while caring for someone with cancer**
- **Questions for carers to ask about work and cancer**
- **Your rights at work when you are affected by cancer.**

For details of how to order, see page 96.



Financial help and benefits

When you are affected by cancer, you might need help with extra costs. Or you might need financial support if you have to stop working.

Statutory Sick Pay

If you work for an employer and take time off sick, you may be able to get Statutory Sick Pay. Your employer will pay this for up to 28 weeks.

Benefits

Benefits are payments from the government to people who need financial help. You can find out more about benefits and apply for them online. Go to **gov.uk** if you live in England, Wales and Scotland or **nidirect.gov.uk** if you live in Northern Ireland.

Here are some benefits that you might be able to get if you are affected by cancer.

Employment and Support Allowance (ESA)

This benefit is for people under State Pension age who cannot work because of illness or disability. There are different types of ESA:

- Contribution-based ESA may be available if you have paid enough National Insurance.
- Income-related ESA may be available if your income and savings are low, or if you cannot get contribution-based ESA. Income-related ESA is gradually being replaced by a new benefit called Universal Credit.

Personal Independence Payment

This benefit is for people aged between 16 and 64 who have problems moving around and looking after themselves. You must have had these difficulties for at least 3 months and expect them to last for at least 9 months.

Attendance Allowance

This benefit is for people aged 65 or over who have problems looking after themselves because of an illness or disability. This could mean getting out of bed, having a bath or getting dressed. You must have had these problems for at least 6 months.

Special rules

If you are terminally ill, and your doctor thinks you may be expected to live for less than 6 months, you can apply for some benefits using a fast-track process called special rules. Your claim will be dealt with quickly and you will get the benefit you applied for at the highest rate. It does not matter if you live longer than 6 months. Your doctor or specialist nurse will need to fill out a form for you.

Help for carers

Carer's Allowance is a weekly benefit that helps people who look after someone with a lot of care needs. If you do not qualify for it, you can apply for Carer's Credit.

Carer's Credit helps prevent gaps in your National Insurance record if you have to stop working while you are caring for someone else. You do not get money, but it protects your right to a State Pension later in life.

Macmillan Grants

Macmillan Grants are small, mostly one-off payments to help people with the extra costs that cancer can cause. They are for people who have a low level of income and savings.

If you need things like extra clothing, help paying heating bills or even a relaxing holiday, you may be able to get a Macmillan Grant.

How much you get will depend on your situation and needs. The average grant is around £380, but this may change from time to time. A grant from Macmillan would not normally affect the benefits you are entitled to. It is an extra bit of help, not a replacement for other support.

Insurance

If you have, or have had, cancer, you may find it hard to get certain types of insurance. This includes life and travel insurance. A cancer diagnosis might also mean that you can get a payout from an insurance scheme that you already have.

If you are looking into buying insurance or making a claim, one of our financial advisers can help. Call **0808 808 00 00**.

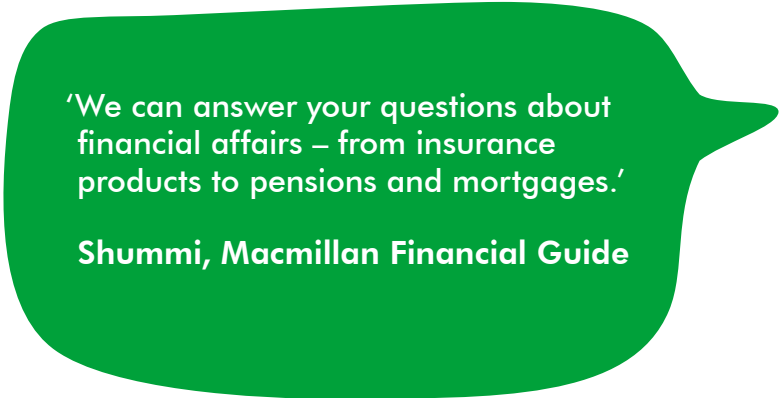
We have more information in our booklets **Insurance** and **Travel and cancer** – see page 96. Our Online Community **Travel insurance** forum may also be helpful. Visit **macmillan.org.uk/travelinsurancegroup**

More information

The benefits system and other types of financial support can be hard to understand. Macmillan has experienced welfare rights advisers and financial guides. You can speak to one by calling the Macmillan Support Line on **0808 808 00 00**.

You can also get information about benefits and other types of financial help from Citizens Advice – see pages 104 to 105.

Our booklet **Help with the cost of cancer** has lots more information – see page 96.



'We can answer your questions about financial affairs – from insurance products to pensions and mortgages.'

Shummi, Macmillan Financial Guide

Travel and holidays

Travelling can be fun and make you feel relaxed. But when you have cancer, you may have a few more things to think about if you are planning a trip.

It is important to check whether you are fit to travel. Your doctor can tell you if there is anything that could make travelling unsafe.

They may advise you to avoid flying if you:

- have recently had surgery
- are breathless
- are anaemic (do not have enough red blood cells)
- are at risk of developing swelling in the brain.

Some cancer treatments, such as radiotherapy and chemotherapy, can cause short-term physical problems. These effects can:

- limit the amount of travelling you can do
- limit the type of activities you can do while you are away
- make your skin more sensitive to the sun.

If you are in the middle of treatment, it does not always mean you cannot travel. Talk to your cancer specialist about the best time to go away. They should also be able to give you advice about what you need to take, or any issues you should think about. With good planning, you can often avoid travel problems.

If you want to travel abroad, it can be more difficult to get travel insurance when you have cancer. Depending on your circumstances, the price for insurance can be much higher than you might expect. Our Online Community **Travel insurance** forum is a good place to get recommendations for travel insurance providers. You can also share your experiences with others. Visit **community.macmillan.org.uk**

We also have more information about travel. To order our booklet **Travel and cancer**, see page 96.



Planning ahead for your care

This is also called advance care planning. It is important to think about your future care in case there is a time when you cannot make or communicate decisions about your treatment.

There are lots of ways you can plan ahead.

Record your wishes for your care

Your wishes for your care include how and where you would like to be cared for if you become seriously ill or are reaching the end of your life.

Create a Power of Attorney

A Power of Attorney is when you give someone you trust the power to make decisions on your behalf. These decisions could be about your property and finances, or your welfare and healthcare, or both.

Create an Advance Decision to Refuse Treatment

An Advance Decision to Refuse Treatment is also known as an Advance Directive or Living Will. It is a record of your decisions about specific treatments you do not want to have.

Other ways to plan ahead

Other ways you can plan ahead include:

- making a will
- funeral planning.

You might find it helpful to read our booklets **Your life and your choices: plan ahead** and **Your step-by-step guide to making a will**. To order, see page 96.






COPING

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Your feelings

It is common to feel overwhelmed by different feelings when you are told that you have cancer. We talk about some of these here. Partners, family and friends may also have some of the same feelings.

You might have different reactions to the ones we describe here. There is no right or wrong way to feel. You will cope with things in your own way. Talking to people close to you or other people affected by cancer can often help.



'My wife has been a big support. It's been hard for her, so she's been in touch with my Macmillan nurse. It's good that she's got somewhere to go for help too.'

Herbie

Shock and disbelief

You may find it hard to believe it when your doctor tells you that you have cancer. It is common to feel shocked and numb. You may not be able to take in much information and find that you keep asking the same questions again and again. At first, you might find it hard to talk to family and friends about the cancer. This usually gets easier as the shock wears off and it becomes more real to you. You may find you cannot think or talk about anything but the cancer. This is because your brain is trying to process what you are going through.

Fear and anxiety

People can be very anxious or frightened about whether treatment will work and what will happen in the future. This uncertainty can be one of the hardest things to cope with. It can help to try to focus on what you can control. You may want to find out more about the cancer, its treatment and how to manage side effects. It can also help to talk about your feelings and to take time to do things that are important to you and that you enjoy.

Doctors often know roughly how many people can benefit from a type of treatment. But they cannot be sure what will happen to an individual person. Although they may not be able to answer your questions fully, they can usually talk through any problems with you and give you some guidance.

Avoidance

Some people cope by not wanting to know very much about the cancer and by not talking about it. If you feel like this, let your family and friends know that you do not want to talk about it right now. You can also tell your doctor if there are things you do not want to know or talk about yet.

Occasionally, this avoidance can be extreme. Some people may not believe that they have cancer. This is sometimes called being in denial. It may stop them making decisions about treatment. If this happens, it is very important for them to get help from their doctor.

Sometimes, avoidance is the other way around. Family and friends may seem to avoid you and the fact that you have cancer. They may not want to talk about it or they might change the subject. This is usually because they are also finding the cancer difficult to cope with, and they may need support too. Try to let them know how this makes you feel and that talking openly with them about your illness will help you.

Anger

You may feel angry about your illness and sometimes resent other people for being well. These are normal reactions, especially when you feel frightened, stressed, out of control or unwell. You may get angry with the people close to you. Let them know that you are angry at your illness and not at them. Finding ways to help you relax and reduce stress can help with anger. This can include talking about or writing down how you feel, gentle exercise, breathing or relaxation therapy, yoga or meditation.

Guilt and blame

Some people feel guilty or blame themselves or others for the cancer. You may try to find reasons for why it has happened to you. Most of the time, it is impossible to know exactly what has caused a person's cancer. Over time, several different factors may act together to cause a cancer. Doctors do not fully understand all of these factors yet. Instead, try to focus on looking after yourself and getting the help and support you need.

Feeling alone

Some people feel alone because they do not have enough support. Family and friends may live far away, have other commitments or feel uncomfortable because of their own fears about cancer. Try to let your family and friends know how you feel and how they could support you more.

If you need more support, you can call the Macmillan Support Line free on **0808 808 00 00** and talk to one of our cancer support specialists. Our website can help you find out about local support groups – visit **macmillan.org.uk/supportgroups** You can also talk to other people going through the same thing on our online community at **macmillan.org.uk/community**

It's normal to have times when you want to be left alone to sort out your feelings. But if you find you are avoiding people a lot of the time, then try to talk to your doctor or nurse.

'I did suffer, so I saw a counsellor, which was amazing. Before this, I didn't believe in counselling! You may wish to try and speak to someone about how you're feeling, as it can be a very lonely time.'

Emma

Being positive

Being positive can mean different things to different people. It could mean managing to deal with whatever situation you are in, being optimistic or finding ways of coping. People find their own way to be positive. What works for one person may not work for another.

Some people say they are able to find something positive about having cancer. For example, they may say that cancer brought them closer as a family. Or people may say that they are glad to have met new people, or feel they have a different outlook on life now.

A lot of people have periods of feeling low in their lives. This is natural. Being told to be positive when you feel low can be frustrating. It can feel as though someone is not accepting how you really feel, even if they are just trying to help. It might help to be honest and explain how that makes you feel.

No one can be positive all the time. You do not have to feel like you are coping all of the time. It is also a positive step to acknowledge and talk about how you are feeling.

If you need more help

Difficult emotions can be very hard to cope with. Sometimes people need more help. This happens to lots of people and is not a bad thing.

If you have a **Macmillan Organiser**, you can use the 'Good days bad days' thinking tool in the **My records** booklet. This can help you decide on steps you can take to have more good days.

If you feel anxious, panicky or sad a lot of the time, or think you may be depressed, there are many ways you can get support. There is information about this over the next few pages.

You may find it helpful to read our booklet **How are you feeling? The emotional effects of cancer** – see page 96.



Getting support

You do not need to cope with cancer on your own. For many people, family and friends are likely to be one of the main sources of support. During your treatment, it is important to communicate with those around you. It is not always easy to tell people you care about how you are feeling.

You may find it easier to talk to someone outside your family. There are many ways you can get the support you need. If you do not have a network of family and friends, you can still get support.

If you have a **Macmillan Organiser**, you can note down what is important to you in the **My records** booklet. You can show this to your support network or healthcare team, to help them understand the areas in your life where you need support.

'Near to where I live is a lovely cancer support centre. They offer a range of complementary therapies, and you can even just drop in for lunch and a chat.'

Ann

Support groups

Self-help or support groups offer a chance to talk to other people who may be in a similar situation. Other people may be facing the same challenges as you. Joining a group can be helpful if you live alone, or do not feel able to talk about your feelings with the people around you. However, not everyone finds talking in a group easy, so it might not be right for you. You can go and see what the group session is like before you decide.

To find a support group in your area, call the Macmillan Support Line on **0808 808 00 00** or visit **[macmillan.org.uk/inyourarea](https://www.macmillan.org.uk/inyourarea)**



Online support

Many people find support on the internet. You may want to join:

- online support groups such as the Macmillan Online Community
- social networking sites
- forums
- chat rooms
- blog sites.

You can use these to meet other people affected by cancer, share your experiences and get support.

‘Everyone is so supportive on the Online Community, they know exactly what you’re going through. It can be fun too. It’s not all just chats about cancer.’

Mal

Information centres

You can find Macmillan information and support centres in hospitals, libraries and on mobile busses. Find your nearest centre at **[macmillan.org.uk/informationcentres](https://www.macmillan.org.uk/informationcentres)** or call us on **0808 808 00 00**.

You can speak with someone face to face and get written information. If you would like to talk privately, most centres have a room where you can speak with someone alone and in confidence.

Cancer helplines

Some helplines are staffed by support specialists who can answer any questions you may have. The Macmillan Support Line is a good place to start. Call us on **0808 808 00 00** or email us at **macmillan.org.uk/talktous**

Our free, confidential phone line is open 7 days a week, 8am to 8pm. Our cancer support specialists can:

- help with any medical questions you have about the cancer or treatments
- help you access benefits and give you financial guidance
- be there to listen if you need someone to talk to
- tell you about support services in your area.

Counsellors

Some people find it very hard to cope with the impact of a cancer diagnosis. In this situation it can help to talk to a counsellor. A counsellor is a trained professional who can listen to you and help you explore your feelings in a place where you feel safe. Counselling is confidential. It can be a great support during a difficult time.

Many NHS services including GP practices and hospitals have a counsellor you can talk to. If they do not, they can put you in contact with one. Some support groups and charities including Mind also offer free counselling services (see pages 101 to 104). You may need to wait a few weeks before your treatment starts. Visit **nhs.uk** for more information on other places that can offer therapy.

You may find it helpful to read our booklet **Talking about your cancer**. To order, see page 96.

Macmillan health and social care professionals

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your healthcare team if there are any Macmillan professionals near you.



Looking after yourself

It can sometimes be difficult to look after yourself during treatment. It can also be hard to cope with the emotional effects of cancer. If you are finding it hard to cope, there are things you can do to help. It may help to take things one day at a time.

Doing even the smallest tasks may help you feel better:

- Try to keep to a regular sleeping pattern. If you can, get up and get dressed every day.
- Try to do some regular physical activity, even if it is only gentle exercise like walking (see page 40).
- Try to eat well every day (see page 38).
- If you feel unwell, talk to your doctor.
- Rest more if you need to.
- Ask for and accept help when you need it.
- Try to share your feelings. It may help to talk to others.
- Make plans to do things you enjoy. It may help to keep doing your hobbies or find new ones that suit your situation.
- Practise relaxation techniques if you feel stressed (see page 79).

Looking after yourself if you are a carer

It can be difficult to look after yourself if you are caring for someone living with cancer. If you are finding it difficult to cope, there are things you can do to help.

Try to share your feelings. It may help to talk to a member of your family, friends or your healthcare team. Talking can help relieve stress. You may also find it helpful to join a support group or to speak to a counsellor (see pages 98 to 99). If you feel overwhelmed or stressed, your GP will be able to help. Relaxation techniques may also help (see opposite).

Try to get plenty of rest and eat well (see page 38). Sometimes this is not easy, especially if you are looking after someone who needs a lot of care at home. If you are struggling, there are organisations that can help (see pages 101 to 107).

There is more information in our booklets **Looking after someone with cancer** and **Caring for someone with advanced cancer** (see page 96).

Complementary therapies

Complementary therapies are generally used in addition to conventional medical treatments. Conventional medical treatments are those used by doctors to treat people with cancer.

There are many types of complementary therapy, such as acupuncture, meditation, and massage. They do not claim that they can treat or cure cancer. People generally use complementary therapies to help them relax or feel better. Sometimes they may be used to relieve symptoms or the side effects of conventional medical treatments.

Sometimes complementary therapy is combined with conventional treatments. This is called integrated or integrative medicine.

Our booklet **Cancer and complementary therapies** has more information (see page 96).



GLOSSARY OF MEDICAL TERMS

Medical terms

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Medical terms

When you have cancer, you will hear or see lots of new words and may not know what they mean. We explain some of them here. Remember, you can call the Macmillan Support Line free on **0808 808 00 00** if you need more information or support. There is also more information on pages 98 to 99.

Abdomen is the part of your body with your stomach, bowel and other parts of the digestive system. It is often called your tummy.

Adjuvant therapy is treatment given after your main cancer treatment. For example, your main treatment may be an operation to remove the cancer. You may then have chemotherapy as an adjuvant therapy to reduce the risk of the cancer coming back.

Advance care planning is planning ahead for how you want to be cared for.

Alopecia is hair loss. It can happen to the hair on your head, eyebrows, eyelashes, and other areas of the body. Hair loss can be a side effect of some cancer treatments, such as chemotherapy. Your healthcare team will talk to you about how to reduce the chance of this happening. They can also help you get a wig if you want one.

Anaemia is when you have a low number of red blood cells in your blood. This can make you feel tired and breathless.

Anaesthetic is a drug that makes people more comfortable during a medical procedure. A general anaesthetic puts a person to sleep for a while. A local anaesthetic numbs a part of the body so the person cannot feel anything.

Benign tumour is a lump in the body that is not cancer. Benign tumours usually grow slowly and do not spread to other parts of the body.

Biopsy is when your doctor takes a small sample of tissue from your body and looks at it under a microscope. This is to see if the cells are cancerous or not.

Blood count is a routine blood test to measure the number of red blood cells, white blood cells and platelets in your blood. It is also called a full blood count (FBC).

Carcinogen is a substance which can cause cancer, such as radiation or the chemicals in cigarettes.

Carcinoma is a type of cancer that starts in epithelial cells. These cells cover the outside of our body and our organs. Most cancers are carcinomas.

Carcinoma in situ is a group of abnormal cells that have stayed in the place where they began. They have not spread. They may become a cancer and grow into nearby tissue.

Carer's assessment is a chance to talk to your local council or social services department about what help you need if you are caring for someone. If you care for someone aged over 18, you have the right to a carer's assessment and support. For more information, contact your local council in England, Wales and Scotland, or your Health and Social Care Board in Northern Ireland. You can also contact Carers UK (see page 107).

Central line is a long, hollow tube made from silicone rubber. The line is put into one of the veins in your chest. It can be used to give chemotherapy treatment and other medicines. It can also be used to take samples of your blood for testing. A Hickman® line is a type of central line.

Chemotherapy is the use of anti-cancer (cytotoxic) drugs to destroy cancer cells, including leukaemia and lymphoma. It can be given alone or with other treatments.

Complementary therapy is the use of other treatments in addition to conventional medical treatments. Examples include acupuncture and meditation.

Consent is agreeing to have treatment. The doctor will usually ask you to sign a form before you have treatment to say that you give your permission. No medical treatment can be given without your consent.



Having chemotherapy

CT scan (computerised tomography scan) is a scan that uses x-rays to build a three-dimensional picture of the inside of the body. This scan usually takes 10 to 30 minutes and is painless.

Cytotoxic means toxic to cells. See **chemotherapy**.

Diagnosis is a description of the illness a person has.

Diarrhoea is having frequent or watery bowel movements (poo). It can sometimes be a symptom of cancer or a side effect of some cancer treatments.

Drip is a way of giving fluids or drugs such as chemotherapy into a vein. It is also called an intravenous (IV) infusion.



Having a CT scan

Fatigue is when you feel extremely tired most, or all, of the time. Cancer and some of its treatments can cause fatigue.

Fertility is the ability to have children.

Fine needle aspiration is a test that uses a thin needle to take a small sample of cells from your body to be examined.

Grade is a way for doctors to describe the growth of a cancer.

Histology is the study of cells. Doctors look at cells under a microscope to see if they are normal or not. If there are cancer cells, they look to see what type of cancer it is. It is sometimes also called histopathology.

Hormonal therapy is treatment that can change the amount or action of certain hormones in the body. This can slow or stop cancer cells from growing.

Hormones are substances produced naturally in the body. They act as chemical messengers and influence the growth and activity of cells.

Immune system is your body's natural defence system. It helps protect against infection and disease. See **lymphatic system**.

Incontinence is when you have trouble controlling your bladder or your bowel.

Inoperable is when cancer cannot be removed by an operation. It might mean the cancer has spread to a part of the body where an operation is not possible or too risky.

Intramuscular injection (IM) is an injection into a muscle.

Intravenous (IV) is when a drug or fluid is given into one of your veins.

Leukaemia is a cancer of the white blood cells. White blood cells fight and prevent infection.

Local therapy is a treatment, for example radiotherapy and surgery, which only affects a particular area of your body.

Lymph is a fluid that flows around your lymphatic system.

Lymphatic system is what helps protect us from infection and disease. It also drains lymph fluid from tissues in the body before returning it to the blood. The lymphatic system is made up of fine tubes called lymphatic vessels. They connect to groups of **lymph nodes** throughout the body.

Lymphoedema is swelling in a part of the body. It develops because of a build-up of fluid in the body's tissues. This happens when the lymphatic system, which normally drains the fluid away, is not working properly. It can happen in any part of the body, but is most likely to affect an arm or a leg.

Lymphoma is a cancer of the lymphatic system.

Lymph nodes (lymph glands) are part of the lymphatic system. They are small and bean-shaped. They filter germs (bacteria) and disease from the lymph fluid.

Malignant tumour is a lump in the body that is cancer. Malignant tumours can spread to different parts of the body.

Metastasis is when the cancer has spread from one part of the body to another. Cancer that has spread is sometimes called metastatic disease or secondary cancer.

MRI scan (magnetic resonance imaging scan) is a scan that uses magnetism to build up a detailed picture of areas of your body.

Multidisciplinary team (MDT) is a group of health and social care professionals who work together to manage your treatment and care.

Nausea is feeling sick.

Negative result means something could not be found. For example, a negative lymph node biopsy means that cancer cells were not found in the lymph nodes.

Having an MRI scan



Neo-adjuvant therapy is treatment given before the main treatment. For example, you might have chemotherapy before surgery to shrink the tumour and make surgery easier or more effective.

Oedema is the build-up of fluid in the body. It causes swelling.

Oncology is the medical specialty that deals with cancer.

Orally is when you take something by mouth. For example, taking a tablet.

Outpatient is when you go into hospital for an appointment and leave on the same day. Outpatients do not stay in hospital overnight.

Paediatrics is the medical specialty that deals with children.

Palliative care is treatment that is given to help improve quality of life when the cancer cannot be cured. Palliative treatment aims to meet the physical, spiritual, psychological and social needs of a person with cancer.

Pathology is the study and diagnosis of disease.

PET scan (positron emission tomography scan) is a test that measures the activity of cells in different parts of the body. It can be used to find out more about a cancer and see if it has spread to other parts of the body.

PICC line is a long, thin, flexible tube. It is put into a vein just above the bend in your elbow. It is used to give chemotherapy or other treatments. It usually stays in until treatment finishes.

Platelet is a type of cell found in your blood. Platelets help your blood to clot to help stop bleeding. Chemotherapy can reduce the number of platelets in your blood for a time, making you more likely to have bleeding and bruising.

Portacath is a long, thin tube that is put in under the skin to give chemotherapy and other drugs. The tube is connected to a small box under the skin.

Positive result means something has been found. For example, a positive lymph node biopsy means that cancer cells were found in the lymph nodes.

Pre-med (pre-medication) is a medication that you may be given before a test or treatment. For example, you may have a pre-med before having chemotherapy to help stop you feeling sick.

Primary cancer is a cancer that starts in one area of the body. Most cancers are primary cancers.

Prognosis is the likely outcome of a disease. The prognosis gives an idea of how long a person might live.

Progression (or progressed) means that the cancer is still growing, or has continued to spread.

Prosthesis is an artificial body part. A prosthesis is used if that part of the body has been removed. It helps with mobility and appearance.

Pump is something that may be used to give you chemotherapy or fluids. The pump makes sure that the right amounts are given over the right amount of time. Some pumps are small and can be taken home, so that you do not have to stay in hospital.

Radiology is the use of imaging such as x-rays and scans to help diagnose cancer.

Radiotherapy uses high-energy x-rays to destroy cancer cells, while doing as little harm as possible to normal cells. It can help to shrink and control the cancer, and relieve symptoms.

Recurrence is when the cancer has come back. If it comes back in the same area of the body, it is called local recurrence. If it has spread to other parts of the body, it is called distant recurrence.

Remission is when treatment is controlling the cancer or has made it temporarily disappear, but it may not have been cured.



Having radiotherapy

Secondary cancers (or secondaries) are where the primary cancer has spread to another part of the body. See **metastasis**.

Stage is a way for doctors to describe a cancer. It means the extent of the cancer. This usually means how big it is and whether it has spread from where it first started.

Subcutaneous injection (SC) is an injection given into the layer of fat under your skin.

Surgery is an operation, often to remove something (such as cancer) from the body.

Systemic therapy is a treatment that treats the whole body. For example, chemotherapy.

Targeted therapy (or biological therapy) is a treatment that interferes with cell processes that cause the cancer to grow.

Therapy is another word for treatment.

Terminal is when no more treatment can be given to control the cancer. It may mean that someone should prepare for the end of life.

Tissue is the way your cells line up next to each other to form part of your body. For example, breast cells line up next to each other to make breast tissue.

Treatment cycle is the time between one round of treatment until the next one starts.

Tumour is a group of cells that are growing in an abnormal way. Tumours can be made up of cells that are not cancerous (benign) or cancerous (malignant).

Tumour markers are proteins produced by some types of cancer. They are found in the blood. They can sometimes help doctors to diagnose the cancer, or see how well treatments are working.

Ultrasound scan is a scan that uses sound waves to create a picture of the inside of your body.

X-ray scan is a way to take pictures of the inside of your body. It can show breaks or problems with your bones and joints. It can also show changes to other body tissues and organs, such as the lungs or breasts.

A healthcare professional in blue scrubs is operating an X-ray machine on a female patient in a hospital gown. The patient is standing and facing the machine. The healthcare professional is looking at the patient and the machine. The machine is white and has a large vertical arm. The patient is wearing a white hospital gown with a blue pattern. The healthcare professional is wearing blue scrubs. The background is a plain white wall.

Having an x-ray



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About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

Order what you need

You may want to order more leaflets or booklets like this one. Visit **be.macmillan.org.uk** or call us on **0808 808 00 00**.

We have booklets on different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer and information for carers, family and friends.

Online information

All of our information is also available at **macmillan.org.uk/information-and-support**

There you'll also find videos featuring real-life stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- eBooks
- large print
- translations.

Find out more at **macmillan.org.uk/otherformats**

If you'd like us to produce information in a different format for you, email us at **cancerinformationteam@macmillan.org.uk** or call us on **0808 808 00 00**.

Help us improve our information

We know that the people who use our information are the real experts. That's why we always involve them in our work. If you've been affected by cancer, you can help us improve our information.

We give you the chance to comment on a variety of information including booklets, leaflets and fact sheets.

If you'd like to hear more about becoming a reviewer, email **reviewing@macmillan.org.uk** You can get involved from home whenever you like, and we don't ask for any special skills – just an interest in our cancer information.



Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we're here to support you.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our free, confidential phone line is open 7 days a week, 8am to 8pm. Our cancer support specialists can:

- help with any medical questions you have about cancer or your treatment
- help you access benefits and give you financial guidance
- be there to listen if you need someone to talk to
- tell you about services that can help you in your area.

Call us on **0808 808 00 00** or email us via our website, **macmillan.org.uk/talktous**

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. There, you can speak with someone face to face.

Visit one to get the information you need, or if you'd like a private chat, most centres have a room where you can speak with someone alone and in confidence.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That's why we help to bring people together in their communities and online.

Support groups

Whether you are someone living with cancer or a carer, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting **macmillan.org.uk/selfhelpandsupport**

Online Community

Thousands of people use our Online Community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at **macmillan.org.uk/community**

The Macmillan healthcare team

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you've been affected in this way, we can help.

Financial guidance

Our financial team can give you guidance on mortgages, pensions, insurance, borrowing and savings.

Help accessing benefits

Our benefits advisers can offer advice and information on benefits, tax credits, grants and loans. They can help you work out what financial help you could be entitled to. They can also help you complete your forms and apply for benefits.

Macmillan Grants

Macmillan offers one-off payments to people with cancer. A grant can be for anything from heating bills or extra clothing to a much-needed break.

Call us on **0808 808 00 00**

to speak to a financial guide or benefits adviser, or to find out more about Macmillan Grants. We can also tell you about benefits advisers in your area. Visit **macmillan.org.uk/financialsupport** to find out more about how we can help you with your finances.

Help with work and cancer

Whether you're an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit **macmillan.org.uk/work**

Macmillan Organiser

This includes a records book to write down information such as appointments, medications and contact details. Call **0808 808 00 00** or visit **be.macmillan.org.uk** to order a free copy. You can also download the app on IOS or Android.

Other useful organisations

There are lots of other organisations that can give you information or support.

General cancer support organisations

Cancer Focus

Northern Ireland

Helpline 0800 783 3339

(Mon to Fri, 9am to 1pm)

Email

nurseline@cancerfocusni.org

www.cancerfocusni.org

Offers a variety of services to people affected by cancer in Northern Ireland, including a free helpline, counselling and links to local support groups.

Cancer Support Scotland

Tel 0800 652 4531

(Mon to Fri, 9am to 5pm)

Email

info@cancersupportscotland.org

[www.](http://www.cancersupportscotland.org)

cancersupportscotland.org

Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

Maggie's Centres

Tel 0300 123 1801

Email

enquiries@maggiescentres.org

www.maggiescentres.org

Has a network of centres in various locations throughout the UK. Provides free information about cancer and financial benefits. Also offers emotional and social support to people with cancer, their family, and friends.

Marie Curie

Helpline 0800 090 2309

(Mon to Fri, 8am to 6pm,
Sat, 11am to 5pm)

www.mariecurie.org.uk

Offers practical information and emotional support for all those affected by terminal illness.

Penny Brohn UK

Helpline 0303 3000 118

(Mon to Fri, 9.30am to 5pm)

Email

helpline@pennybrohn.org.uk

www.pennybrohn.org.uk

Offers physical, emotional and spiritual support across the UK, using complementary therapies and self-help techniques.

Riprap

www.riprap.org.uk

Developed especially for teenagers in the UK who have a parent with cancer. Has an online forum where teenagers going through similar experiences can talk to each other for support.

Tenovus

Helpline 0808 808 1010

(Daily, 8am to 8pm)

Email

info@tenovuscancercare.org.uk

www.

tenovuscancercare.org.uk

Aims to help everyone in the UK get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, benefits advice and an online 'Ask the nurse' service.

General health information

Health and Social Care in Northern Ireland

www.hscni.net

Provides information about health and social care services in Northern Ireland.

Healthtalk

Email

info@healthtalk.org

www.healthtalk.org

and

www.healthtalk.org/young-peoples-experiences

(site for young people)

Has information about cancer, and videos and audio clips of people's experiences.

Also provides advice on topics such as making decisions about health and treatment.

National Cancer Institute

www.cancer.gov

Gives information on cancer, cancer treatments and cancer research.

NHS.UK

www.nhs.uk

The UK's biggest health information website. Has service information for England.

NHS Direct Wales**www.nhsdirect.wales.nhs.uk**

NHS health information site for Wales.

NHS Inform**Helpline** 0800 22 44 88

(Daily, 8am to 10pm)

www.nhsinform.scot

NHS health information site for Scotland.

Patient UK**www.patient.info**

Provides people in the UK with information about health and disease. Includes evidence-based information leaflets on a wide variety of medical and health topics. Also reviews and links to many health- and illness-related websites.

Emotional support and well-being**British Association for Counselling and Psychotherapy (BACP)****Tel** 01455 883 300**Email** bacp@bacp.co.uk

Promotes awareness of counselling and signposts people to appropriate services across the UK. You can search for a qualified counsellor at **itsgoodtotalk.org.uk**

British Complementary Medicine Association (BCMA)**Tel** 0845 345 5977

(Mon, Tue, Thu and Fri, 10am to 5pm)

Email office@bcma.co.uk**www.bcma.co.uk**

Has a code of conduct, and a list of registered practitioners who belong to member organisations. Can provide practitioners' contact details.

Samaritans

Helpline 116 123

Email jo@samaritans.org

www.samaritans.org

Samaritans branches are located across England, Ireland, Scotland and Wales. Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

UK Council for

Psychotherapy (UKCP)

Tel 020 7014 9955

Email info@ukcp.org.uk

www.psychotherapy.org.uk

Holds the national register of psychotherapists and psychotherapeutic counsellors, listing practitioners who meet exacting standards and training requirements.

Financial or legal advice and information

Benefit Enquiry Line Northern Ireland

Helpline 0800 022 4250

(Mon, Tue, Wed and Fri, 9am to 5pm, and Thu, 10am to 5pm)

Textphone 0289 031 1092

www.nidirect.gov.uk/

money-tax-and-benefits

Provides information and advice about disability benefits and carers' benefits in Northern Ireland.

Citizens Advice

Provides advice on a variety of issues including financial, legal, housing and employment issues. Use their online webchat or find details for your local office in the phone book or by contacting:

England

Helpline 03444 111 444

www.citizensadvice.org.uk

Scotland

Helpline 0808 800 9060

**www.citizensadvice.org.uk/
scotland**

Wales

Helpline 03444 77 2020
www.citizensadvice.org.uk/wales

Northern Ireland

Helpline 0800 028 1181
www.citizensadvice.co.uk

Civil Legal Advice

Helpline 0345 345 4345
(Mon to Fri, 9am to 8pm,
Sat, 9am to 12.30pm)
Minicom 0345 609 6677
www.gov.uk/civil-legal-advice

Has a list of legal advice centres in England and Wales and solicitors that take legal aid cases. Offers a free translation service if English isn't your first language.

Department for Work and Pensions (DWP) Personal Independence Payment (PIP) Helpline
0345 850 3322

Textphone 0345 601 6677
(Mon to Fri, 8am to 6pm)

Carer's Allowance Unit
Tel 0800 731 0297

Textphone 0800 731 0317
(Mon to Fri, 8am to 6pm)

www.gov.uk/carers-allowance

Manages state benefits in England, Scotland and Wales. You can apply for benefits and find information online or through its helplines.

GOV.UK

www.gov.uk

Has information about social security benefits and public services in England, Scotland and Wales.

NiDirect

www.nidirect.gov.uk

Has information about benefits and public services in Northern Ireland.

The Money Advice Service Helpline

0800 138 7777 (English)

0800 138 0555 (Welsh)

(Mon to Fri, 8am to 8pm,
Sat, 9am to 1pm)

Typetalk

18001 0300 500 5000

Email enquiries@

moneyadvice.service.org.uk

www.

moneyadvice.service.org.uk

Runs a free financial health check service and gives advice about all types of financial matters across the UK. Has an online chat service for instant money advice.

National Debtline (England, Scotland and Wales)

Tel 0808 808 4000

(Mon to Fri, 9am to 8pm,
Sat, 9.30am to 1pm)

www.nationaldebtline.org

A national helpline for people with debt problems. The service is free, confidential and independent. Has an online chat service with an expert debt advisor.

Personal Finance Society – ‘Find an Adviser’ service **www.thepfs.org/yourmoney/find-an-adviser**

Use the website to find qualified financial advisers in your area.

Unbiased.co.uk

Helpline 0800 023 6868

Email contact@unbiased.co.uk

www.unbiased.co.uk

You can search the website for qualified advisers in the UK who can give expert advice about finances, mortgages, accounting or legal issues.

Equipment and advice on living with a disability

Disability Rights UK

Tel 0207 250 8181

(Mon to Fri, 10am to 12.30pm,
then 1.30pm to 4pm)

Email

enquiries@disabilityrightsuk.org

www.

disabilityrightsuk.org

Provides information on social security benefits and disability rights in the UK. Has a number of helplines for specific support, including information on going back to work, direct payments, human rights issues, and advice for disabled students.

Disabled Living Foundation (DLF)

Helpline 0300 999 0004
(Mon to Fri, 10am to 4pm)

Email info@dlf.org.uk

www.dlf.org.uk

Provides free, impartial advice about all types of disability equipment and mobility products.

Support for carers**Carers Direct**

Helpline 0300 123 1053
(Mon to Fri, 9am to 8pm and
Sat to Sun, 11am to 4pm)

Textphone

18001 0300 123 1004
Confidential information and advice for carers. Offers advice on financial support, getting a break from caring, going to work and much more.

Carers Trust

Tel 0300 772 9600
(Mon to Fri, 9am to 5pm)

Email info@carers.org

www.carers.org

Provides support, information, advice and services for people caring at home for a family member or friend. You can find details for UK offices and search for local support on the website.

Carers UK

Helpline
(England, Scotland, Wales)
0808 808 7777

(Mon to Wed, 10am to 4pm)

Helpline (Northern Ireland)
028 9043 9843

Email advice@carersuk.org

www.carersuk.org

Offers information and support to carers across the UK. Has an online forum and can put people in contact with support groups for carers in their area.

YOUR NOTES AND QUESTIONS

A series of horizontal green lines for writing notes and questions. The lines are evenly spaced and extend across the width of the page, providing a structured area for student input.

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos may be of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by Dr Tim Iveson, Consultant Medical Oncologist and Macmillan Chief Medical Editor.

With thanks to: Justine Burton, Macmillan Welfare Rights Technical Lead; Emma Cross, Macmillan Financial Support Partnerships Manager; Liz Egan, Macmillan Working Through Cancer Programme Lead; Christina Helden, Healthcare Advisory Solicitor, Hempsons; Dr Ananth Shankar, Consultant in Paediatric & Adolescent Oncology; Natalie Singer, Macmillan Advanced Haemato-Oncology Clinical Nurse Specialist; Melanie Strickland, Macmillan Senior Solicitor; and Alison Whiteford, Macmillan Expert Information Development Nurse.

Thanks also to the people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **cancerinformationteam@macmillan.org.uk**

Sources

We have listed a sample of the sources used in this publication below. If you would like further information about the sources we use, please contact us at **cancerinformationteam@macmillan.org.uk**

Citizens Advice. Personal independence payment. www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/pip (accessed January 2018).

NHS. NHS out-of-hours services. www.nhs.uk/nhsengland/aboutnhsservices/emergencyandurgentcareservices/pages/nhs-out-of-hours-services (accessed January 2018).

NI Direct. Protection against disability discrimination. www.nidirect.gov.uk/articles/protection-against-disability-discrimination (accessed January 2018).

NICE. Shared decision making. www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/nice-guidelines/shared-decision-making (accessed January 2018).

Can you do something to help?

We hope this booklet has been useful to you. It's just one of our many publications that are available free to anyone affected by cancer. They're produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we're there to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.



Share your cancer experience

Support people living with cancer by telling your story, online, in the media or face to face.

Campaign for change

We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

Help someone in your community

A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

Raise money

Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

Give money

Big or small, every penny helps. To make a one-off donation see over.

Call us to find out more

0300 1000 200

macmillan.org.uk/getinvolved

Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £

(Please delete as appropriate)

I enclose a cheque / postal order /
Charity Voucher made payable to
Macmillan Cancer Support

OR debit my:

Visa / MasterCard / CAF Charity
Card / Switch / Maestro

Card number

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Valid from

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Issue no

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Security number

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Signature

Date / /

Don't let the taxman keep your money

Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

- ☐ I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made to Macmillan Cancer Support in the last 4 years as Gift Aid donations, until I notify you otherwise.

I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box. ☐

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.



If you'd rather donate online go to macmillan.org.uk/donate

Please cut out this form and return it in an envelope (no stamp required) to:
Supporter Donations, Macmillan Cancer Support, FREEPOST LON15851,
89 Albert Embankment, London SE1 7UQ

This booklet is for anyone living with cancer. There is also information for carers, family members and friends. This booklet explains what cancer is and what to expect. It has information to help with emotional, practical and financial issues. It also explains where you can get more information and support.

We're here to help everyone with cancer live life as fully as they can, providing physical, financial and emotional support. So whatever cancer throws your way, we're right there with you. For information, support or just someone to talk to, call **0808 808 00 00** or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available. Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using NGT (Text Relay) on **18001 0808 808 00 00**, or use the NGT Lite app.

Need information in different languages or formats? We produce information in audio, eBooks, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

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CANCER SUPPORT
RIGHT THERE WITH YOU

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