CANCER TREATMENT AND FERTILITY—INFORMATION FOR MEN

A practical guide to living with and after cancer

WE ARE MACMILLAN. CANCER SUPPORT
Contents

About this booklet  3
Talking to your medical team  5
Fertility in men  6
Contraception  7
Cancer treatments and fertility  8
Preserving your fertility  17
Fertility treatment after cancer treatment  21
Getting support  26
How we can help you  28
Other useful organisations  32
Further resources  37
Your notes and questions  40
About this booklet

This booklet is for men who want information about the effects of cancer treatment on their fertility (the ability to have children). It explains the possible effects of treatments and ways of preserving or protecting your fertility.

Being told you have cancer and that treatment may make you infertile can be very difficult. For some men, the possibility of losing their fertility may be as difficult to accept as the cancer diagnosis. You may have planned to have children in the future or you may not have thought much about it before now.

We hope this booklet answers some of your questions and helps you deal with some of the feelings you may have. We have included comments from men whose fertility has been affected by cancer. Some are from our online community (macmillan.org.uk/community) and others are from the website healthtalkonline.org Some names have been changed.

‘When I was initially diagnosed, the thought of children and the possible loss of fertility didn’t really enter my head at all. It was only when the doctor advised me that the treatment might affect my ability to have children and the options surrounding that, that it really came up on the agenda.’

Robert
You may find it helpful to talk to someone about how you feel. There’s more information about this and the support available on page 26. Turn to pages 32–39 for some useful addresses and websites, and page 40 to write down any notes or questions for your doctor or nurse.

If you’d like to discuss this information, call the Macmillan Support Line free on 0808 808 00 00, Monday–Friday, 9am–8pm. If you’re 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

If you find this booklet helpful, you could pass it on to your family and friends. They may also want information to help them support you.
Talking to your medical team

It’s important to talk to your cancer doctor or specialist nurse about fertility before you start treatment. Think about the questions you want to ask so you can get all the information you need. If you have a partner, it’s usually a good idea to include them too.

If treatment could make you infertile, your doctor should talk to you about having your sperm stored before treatment starts. This is sometimes called sperm banking. It means you and a partner may be able to have a child later on, even if treatment makes you infertile.

There are rules about fertility treatment in the NHS. If you decide to have fertility treatment later on, it is important to remember that these rules will apply to your partner as well as to you. Fertility treatment rules and funding vary across the UK. Talk to your fertility specialist about this.

Your cancer doctor can refer you to a fertility clinic straight away. This means that having your sperm stored won’t cause too much delay to your treatment. But in some situations, treatment has to start immediately. This means that sperm banking may not always be possible.

If you had cancer treatment in the past and are having problems with fertility, talk to your cancer doctor. They can refer you and your partner to a fertility expert for tests and advice.
Fertility in men

From puberty, the testicles begin to make and store millions of sperm. This is mainly controlled by the hormone testosterone. You also need testosterone for your sex drive and to be able to get an erection.
Normally you need to have sex for a woman’s egg to be fertilised by your sperm. This involves getting an erection (erect penis) and ejaculating into a woman’s vagina. The fluid ejaculated (released) is semen, which contains sperm that can fertilise a woman’s egg.

Some couples need to have fertility treatment to have a baby. This is also called assisted conception. Different treatments can be used to help people who have difficulty getting pregnant naturally.

We have more information about fertility in our booklets Sexuality and cancer, and Relationships, sex and fertility for young people affected by cancer.

**Contraception**

During treatment, it’s important that you use contraception to avoid a pregnancy. This is because cancer treatments may damage sperm and this could possibly harm a baby that’s conceived at this time.

There isn’t any evidence that cancer treatments harm children that are conceived after treatment. But doctors usually advise you to carry on using contraception for about a year after treatment. You can talk about this with your cancer doctor or specialist nurse.

It may take years for some men’s fertility to come back. This could happen without you being aware of it. If you don’t want to have a child, make sure you use contraception unless doctors tell you your infertility is permanent.
Cancer treatments and fertility

The main treatments for cancer are chemotherapy, radiotherapy, surgery, hormonal therapy and targeted therapy.

They affect fertility in different ways. Some treatments can:

• stop or slow down sperm production

• damage the cells that produce sperm (these cells are called germ cells)

• damage nerve endings or blood vessels in the pelvic area, which causes problems with erections or ejaculation

• affect hormone (testosterone) production.

After treatment, you can have your sperm tested regularly to find out if you’ve started to produce healthy sperm again.

Being able to get an erection and ejaculate does not always mean that you are fertile. Sometimes the semen may not have sperm in it.

Chemotherapy

Chemotherapy uses anti-cancer (cytotoxic) drugs to destroy cancer cells. It can affect fertility by slowing down or stopping sperm production. For most men this is temporary, but for others it can be permanent.
It will depend on:

• **which drugs you have** – some chemotherapy drugs affect fertility more than others

• **the dose** – higher doses of chemotherapy, especially with stem cell transplants, are more likely to affect fertility

• **whether you have a combination of drugs** – different drugs given together may be more likely to affect fertility than a single drug.

After chemotherapy, it may take two years or more for your fertility to return to normal. Problems with sperm production should not stop you from getting erections or enjoying sex.

In some situations, it may be possible to choose a chemotherapy treatment that’s less likely to affect your fertility. Your cancer doctor will explain if this is an option for you.

‘They said I’m going to have to have chemotherapy, which meant sperm banking because there’s a high percentage of men that don’t get a high sperm count back after having chemotherapy. Because we were interested in having a family at some point in the near future, my wife and I agreed that sperm banking was the way forward.’

James
Radiotherapy

Radiotherapy treats cancer by using high-energy rays to destroy cancer cells. It can cause fertility problems by:

- affecting sperm production
- causing problems with erections
- reducing testosterone.

Radiotherapy to the pelvis

Radiotherapy destroys cancer cells in the treated area, but it can also affect some surrounding healthy tissue. Radiotherapy to the pelvic area close to the testicles can cause infertility, which may be temporary or permanent. Sometimes the radiographer may use special ‘shielding cups’ to cover and protect the testicles from radiation.

You may have intensity modulated radiotherapy (IMRT). This is a specialised way of giving radiotherapy that shapes the beams to fit the outline of tumours more precisely. This means lower doses are given to the healthy tissue surrounding the tumour. This can reduce the risk of damage and side effects.

If you have radiotherapy directly to the testicles, it will cause permanent infertility by affecting sperm production. It may also reduce the amount of testosterone you produce, which can affect your sex drive and your ability to get an erection.

Pelvic radiotherapy reduces the amount of sperm you produce. This means that, when you ejaculate, you may notice that only a small amount of fluid comes out. Radiotherapy may also affect the quality of the sperm in the semen. Some men don’t produce any semen at all, which is known as a dry ejaculation.
Some men develop problems with erections (erectile dysfunction) after radiotherapy to the pelvis. This may be due to nerve damage or narrowing of the blood vessels to the penis. Although you may feel embarrassed, you should talk to your doctor if you’re having problems. There are treatments that may help with this.

Radiotherapy can also reduce the amount of testosterone you produce. This can lower your sex drive and ability to get an erection. You can take testosterone replacement therapy to treat this (see page 25). However, this might affect your sperm production. If you want to have children, speak to your cancer doctor before starting it.

The risk of infertility is generally related to the dose of radiotherapy given to the pelvic area. Fertility may never return or might return slowly. It can take up to five years for your fertility to come back. If you’re not producing sperm after this time, it’s unlikely that your fertility will return.

**Total body irradiation (TBI)**
TBI is radiotherapy given to the whole body before a donor stem cell or bone marrow transplant. This usually causes permanent infertility. Your cancer specialist can talk to you about this before you consent to treatment.

**Radiotherapy to the brain**
Radiotherapy to the pituitary gland can sometimes affect fertility. The pituitary gland is at the base of the brain. It controls the hormones (gonadotrophins) that stimulate the testicles to produce testosterone and sperm.
Low levels of testosterone can be treated with replacement therapy (see page 25). But this therapy might affect your sperm production. Sometimes gonadotrophin injections can be used to stimulate the testicles to start producing sperm again. If you want to have children, speak to your fertility doctor before starting replacement therapy.

**Other types of radiotherapy**
Radioactive iodine is a type of radiotherapy used to treat thyroid cancer. It doesn’t usually affect fertility, although there is a slightly increased risk for men who have several treatments with radioactive iodine.

**Radiotherapy to areas of the body not mentioned here won’t cause infertility.**

**Surgery**
Surgery can affect fertility by causing problems with erections and ejaculation or by reducing testosterone.

**Surgery to the testicles**
Having one testicle removed for testicular cancer shouldn’t affect your fertility. But having both testicles removed, which may happen if the cancer comes back, causes permanent infertility.

Men with testicular cancer may have a retroperitoneal lymph node dissection. This is an operation to remove lymph nodes in the abdomen (tummy). It may cause retrograde ejaculation. This is when your semen and sperm go backwards into your bladder instead of coming out of your penis when you orgasm. However, this is becoming less common as surgeons use new nerve-sparing techniques to help protect the nerves. It doesn’t affect your ability to get an erection or have an orgasm.
Surgery to the pelvic area or abdomen
Some operations to the pelvic area or spine may damage nerves and blood vessels, making it impossible to get an erection.

Surgery to the pituitary gland
Surgery may be used to remove a tumour in the pituitary gland at the base of the brain. The pituitary gland controls the hormones that stimulate the testicles to produce testosterone and sperm.

Surgeons try to remove the tumour while leaving some of the gland but this isn’t always possible. When the whole gland is removed, this affects the hormones. Gonadotrophin (hormone) injections may be used to stimulate the testicles to start producing sperm again.

‘Another issue for me, as a lad of 20, was that of fertility. It was an extraordinary situation – I had my operation on a Tuesday, and then had to go and do my sperm donation on the Friday so that I could start my chemotherapy. It was definitely the right thing to do, but a bit of a shock at the time!’

Terry
Hormonal therapy

Hormonal therapy works by lowering your level of testosterone, which can help stop cancer cells growing. Doctors may use it to treat breast cancer in men and prostate cancer. Side effects can include loss of sex drive and problems getting or keeping an erection. These often return to normal after stopping treatment, but some men continue to have problems.

There are different techniques that may help improve these problems. Your cancer or fertility doctor can give you more information about this.

You can read more about this in our booklet *Sexuality and cancer*.

Targeted therapy

Targeted therapies are a new type of cancer treatment. It’s not yet known exactly how they can affect fertility. You can ask your cancer specialist for information about how this treatment may affect your fertility.
Preserving your fertility

It can be difficult to predict if treatment will affect your fertility or if it will return to normal after treatment. Even if your chances of becoming infertile are low, you may still be advised to store (bank) sperm. Freezing and storing sperm is a safe technique that has been successfully used for many years. There is no lower age limit for this, as long as you have reached puberty and are producing sperm.

Your sperm can then be used in the future, along with fertility treatments, to help you and a partner have a child.

Your cancer doctor or specialist nurse can discuss this with you and refer you to a fertility clinic before your treatment starts. Most clinics will make sure you’re seen very quickly. But sometimes it may not be possible to store sperm because cancer treatment needs to start straight away. Storing sperm after treatment starts is generally not advised.

Some religions may not agree with certain fertility treatments. If this is an issue for you, you may want to discuss it with your partner, family or religious adviser. You can also talk in confidence with a trained counsellor or social worker.
Collecting sperm

Before sperm samples are stored, you’ll be asked to sign a consent form that explains how your sperm will be used. If you are under 16, your parent or guardian may be asked to sign some forms too.

You will have some blood taken to test for infectious diseases such as hepatitis and HIV. This is standard procedure for all men storing sperm.

You’ll probably be asked to provide sperm samples by masturbation. This takes place in a private room in the clinic. If you have a partner, they can be with you if you want. You will be asked to provide two or three samples over a week. Understandably, you may find this difficult and embarrassing, but the clinic staff will be sensitive.

You’re usually advised not to have sex or masturbate for a couple of days before collecting each sample. This allows more sperm to be collected. Sometimes it may be possible to provide a sample produced at home. This can only be done if you can deliver it to the fertility clinic within 30–45 minutes of producing the sample.

‘I always knew I wanted children and I was gutted when I finally went to freeze sperm and I only managed to store one sample. But there are many ways to have children. You can adopt and although it’s not biological, I don’t think it matters because you will still love and care for the child in the same way.’

Josh
Sperm extraction
For men who can’t produce sperm through masturbation, it may be possible to take a small amount of fluid or tissue straight from the testicle. This can be done in two ways:

- **Percutaneous epididymal sperm aspiration (PESA)** – a fine needle is passed into the testicle to withdraw (aspirate) some fluid.

- **Testicular sperm extraction (TESA)** – tiny bits of tissue (biopsies) are taken from the testicles and examined for sperm under a microscope.

These procedures will be done by a specialist doctor. You will have a local anaesthetic and sedation, or general anaesthetic.

The fluid or tissue that’s removed is looked at in a laboratory. Any sperm in the fluid or tissue is removed, frozen and stored for future use. This can be done for men who have problems producing sperm before their treatment starts, and after treatment for men who haven’t had sperm stored.

Urinary sperm retrieval
If you have retrograde ejaculation, you will still produce sperm. But your sperm and semen will go backwards into your bladder instead of out of your penis when you orgasm (see page 13).

Sometimes doctors are still able to collect your sperm. You will be given a drink that makes your urine less harmful to your sperm. You will be asked to pass urine and then masturbate. After you ejaculate, you will have to pass urine again. The sperm is quickly collected from this urine.
Freezing testicular tissue
Researchers are looking into removing and freezing testicular tissue from boys who haven’t yet reached puberty. It is hoped that the tissue can later be re-implanted to preserve their fertility. Researchers are also looking into whether they can produce sperm from these cells in a laboratory. These techniques are experimental and doctors don’t yet know the risks involved. Only a couple of centres in the UK offer this service.

Storing sperm

The NHS provides sperm storage for men with cancer, but in private clinics you may have to pay for it yourself. Sperm is usually stored for 10 years. But for men affected by cancer, it can be stored for up to 55 years. The staff at the fertility clinic will explain this to you.

Your sample will be frozen and stored in a tank of liquid nitrogen. This is called cryopreservation.

Even if the number of sperm is low, your sample can still be frozen, stored and used later. This is also possible if you started treatment quickly and couldn’t provide all the samples.
Fertility treatment after cancer treatment

Fertility techniques

If you decide you want to start a family, the stored sperm will be thawed in a laboratory. It can then be directly inserted into a woman’s womb (artificial insemination) or used for in vitro fertilization (IVF). During IVF, eggs are mixed with the sperm in a laboratory to see if an egg fertilises and becomes an embryo. The embryo is then transferred into the womb.

Sometimes a technique known as ICSI (intra-cytoplasmic sperm injection) may be used. This is done in the laboratory. A tiny pipette (dropper) holds the egg. A fine needle is used to inject a single sperm directly into the egg. If the egg is fertilised by the sperm, the embryo can be transferred into the womb.

![Diagram of intracytoplasmic sperm injection (ICSI)](image-url)
This technique is helpful when:

• cancer treatment has to start quickly

• the cancer or its treatment has slowed sperm production

• the sperm quality of the frozen samples is poor.

Unfortunately, there aren’t any guarantees that stored sperm will be able to fertilise an egg and result in a pregnancy. Your fertility expert will discuss this with you before your sperm is stored. However, many couples have had babies as a result of storing sperm and using fertility treatments.

**Possible risks**
Using frozen, stored sperm has been carried out for many years and there don’t appear to be any risks to the child. IVF has been used for over thirty years and appears to be safe.

ICSI has been used for over twenty years. Some studies show a very slight risk of rare birth disorders in children born after ICSI. But it is generally regarded as a safe procedure. You can talk to your fertility doctor about ICSI risks and benefits.

Removing and using sperm directly from the testicle is a relatively new technique. Your fertility doctor can give you more information about any possible risks with these treatments.
Using donated sperm

If treatment has made you permanently infertile and you have not had sperm stored, you and your partner may think about using donated sperm. Choosing to use donated sperm can be a difficult decision. The clinic doctor will offer you and your partner counselling about this. It may not be acceptable for some people for religious reasons. If you are worried or unsure about this, speak to your religious advisor.

There’s a shortage of sperm donors in the UK so you may have to wait to find a suitable one. It may not be funded by the NHS in some areas of the UK. The staff at the fertility clinic can talk to you about this.

Everyone who donates sperm is carefully selected:

- Usually a donor is matched as closely as possible for eye and hair colour, physical build and ethnic origin.

- The donor has to be fit and healthy with no medical problems.

- The donor is tested for infectious diseases such as HIV, hepatitis B and C and some genetic conditions.
Testosterone replacement therapy

Some treatments to the pituitary gland or the testicles may reduce your testosterone levels. Testosterone levels can reduce slowly. This may lead to difficulties in getting an erection or a reduced sex drive, sometimes years after treatment. It can also cause other problems such as thinning of the bones (osteoporosis), tiredness and a low mood.

Testosterone replacement therapy will help to reduce these problems. It can be given for life. But it can affect your sperm production. If you want to have children, speak to your fertility doctor before starting this therapy.

Testosterone replacement is given as:

• a patch that’s applied to the skin (transdermal)

• a gel rubbed into your skin

• an implant or injection into a muscle.

Your cancer specialist can give you more advice about this.
Infertility can be distressing to live with. Having children is an important part of many people’s lives or their future plans. It may seem especially hard when you’re already coping with cancer. Not knowing whether your fertility will come back or not can be hard to cope with.

Some men find it helpful to talk things over with their partner, family or friends. Others might prefer to talk to a trained counsellor. Your GP or cancer specialist can arrange this for you. Many hospitals also have specialist nurses who can offer support, and fertility clinics usually have a counsellor you can talk to.

‘I wanted to deal with it on my own and I had all the natural feelings of loss of manliness, worry about “performing”, worry about fertility and recurrence. My other half was great but I know she struggled to know what to do. But she was always there for me.’

Jason

Talking to other men in a similar position may help you feel less isolated. Some of the organisations listed on pages 32–36 can arrange this as well as specialist advice and counselling. Or you can talk to people online. Our online community at macmillan.org.uk/community is a good place to talk to other men who may be in a similar situation.
How we can help you

Cancer is the toughest fight most of us will ever face. But you don’t have to go through it alone. The Macmillan team is with you every step of the way.

Get in touch

Macmillan Cancer Support
89 Albert Embankment,
London SE1 7UQ
Questions about cancer?
Call free on 0808 808 00 00
(Mon–Fri, 9am–8pm)
www.macmillan.org.uk
Hard of hearing?
Use textphone 0808 808 0121
or Text Relay.
Non-English speaker?
Interpreters are available.

Clear, reliable information
about cancer

We can help you by phone, email, via our website and publications or in person. And our information is free to everyone affected by cancer.

Macmillan Support Line
Our free, confidential phone line is open Monday–Friday, 9am–8pm. Our cancer support specialists provide clinical, financial, emotional and practical information and support to anyone affected by cancer. 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, and offer you the opportunity to speak with someone face to face. Find your nearest one at macmillan.org.uk/informationcentres
Publications
We provide expert, up-to-date information about different types of cancer, tests and treatments, and information about living with and after cancer. We can send you free booklets, leaflets, and fact sheets.

Other formats
We have a small range of information in other languages and formats. Our translations are for people who don’t speak English and our Easy Read booklets are useful for anyone who can’t read our information. We also produce a range of audiobooks. Find out more at macmillan.org.uk/otherformats

Please email us at cancerinformationteam@macmillan.org.uk if you’d like us to produce our information for you in Braille or large print.

You can find all of our information, along with several videos, online at macmillan.org.uk/cancerinformation

Review our information
Help us make our resources even better for people affected by cancer. Being one of our reviewers gives you the chance to comment on a variety of information including booklets, fact sheets, leaflets, videos, illustrations and website text.

If you’d like to hear more about becoming a reviewer, email reviewing@macmillan.org.uk

Need out-of-hours support?
You can find a lot of information on our website, macmillan.org.uk
For medical attention out of hours, please contact your GP for their out-of-hours service.
Someone to talk to

When you or someone you know has cancer, it can be difficult to talk about how you’re feeling. You can call our cancer support specialists to talk about how you feel and what’s worrying you.

We can also help you find support in your local area, so you can speak face to face with people who understand what you’re going through.

Professional help

Our Macmillan nurses, doctors and other health and social care professionals offer expert treatment and care. They help individuals and families deal with cancer from diagnosis onwards, until they no longer need this help.

You can ask your GP, hospital consultant, district nurse or hospital ward sister if there are any Macmillan professionals available in your area, or call us.

Support for each other

No one knows more about the impact cancer has on a person’s life than those who have been affected by it themselves. That’s why we help to bring people with cancer and carers together in their communities and online.

Support groups
You can find out about support groups in your area by calling us or by visiting macmillan.org.uk/selfhelpandsupport

Online community
You can also share your experiences, ask questions, get and give support to others in our online community at macmillan.org.uk/community
Financial and work-related support

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. Some people may have to stop working.

If you’ve been affected in this way, we can help. Call the Macmillan Support Line and one of our cancer support specialists will tell you about the benefits and other financial help you may be entitled to.

We can also give you information about your rights at work as an employee and help you find further support.

Macmillan Grants
Money worries are the last thing you need when you have cancer. A Macmillan Grant is a one-off payment for people with cancer, to cover a variety of practical needs including heating bills, extra clothing, or a much-needed break.

Find out more about the financial and work-related support we can offer at macmillan.org.uk/financialsupport

Learning about cancer

You may find it useful to learn more about cancer and how to manage the impact it can have on your life.

You can do this online on our Learn Zone – macmillan.org.uk/learnzone – which offers a variety of e-learning courses and workshops. There’s also a section dedicated to supporting people with cancer – ideal for people who want to learn more about what their relative or friend is going through.
Other useful organisations

**Fertility support organisations**

**British Infertility Counselling Association**
111 Harley Street,
London W1G 6AW
**Tel** 01372 451 626
**Email** info@bica.net
**www.bica.net**
A charity dedicated to providing the highest standard of counselling and support to people affected by infertility. You can use the website to find a counsellor in your area.

**College of Sexual and Relationship Therapists**
PO Box 13686,
London SW20 9ZH
**Tel** 020 8543 2707
**Email** info@cosrt.org.uk
**www.cosrt.org.uk**
Provides information on sexual problems. Lists of therapists are available on the website.

**Human Fertilisation and Embryology Authority (HFEA)**
Finsbury Tower,
103–105 Bunhill Row,
London EC1Y 8HF
**Tel** 020 7291 8200
**Email** enquiriesteam@hfea.gov.uk
**www.hfea.gov.uk**
Regulates licensed assisted conception treatment and research in the UK. Produces free patient information on licensed UK units with success rates for live births, how to go about choosing a clinic, plus a range of useful leaflets. Information is also available on their website.
Infertility Network UK
Charter House,
43 St Leonards Road,
Bexhill on Sea,
TN40 1JA
Tel 0800 008 7464
Email admin@infertilitynetworkuk.com
www.infertilitynetworkuk.com
Provides information, support, telephone counselling and helpful contacts for people with fertility difficulties.

Sexual Advice Association
Suite 301, Emblem House,
London Bridge Hospital,
27 Tooley Street,
London SE1 2PR
Tel 020 7486 7262
Email info@sexualadviceassociation.co.uk
www.sexualadviceassociation.co.uk
A charity that helps people with impotence (erectile dysfunction) and their partners. Aims to raise awareness of the condition among the public and medical professionals. Provides up-to-date information on erectile dysfunction and can put people in touch with specialist practitioners.

Counselling and emotional support

British Association for Counselling and Psychotherapy (BACP)
BACP House,
15 St John’s Business Park,
Lutterworth LE17 4HB
Tel 01455 883 300
Email bacp@bacp.co.uk
www.bacp.co.uk
Promotes awareness of counselling and signposts people to appropriate services. You can search for a qualified counsellor at itsgoodtotalk.org.uk

UK Council for Psychotherapy (UKCP)
2nd Floor, Edward House,
2 Wakley Street,
London EC1V 7LT
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.
General cancer support organisations

**Cancer Black Care**
79 Acton Lane, London NW10 8UT
**Tel** 020 8961 4151
**Email** info@cancerblackcare.org.uk
**www.cancerblackcare.org.uk**
Offers information and support to people with cancer from ethnic communities, their friends, carers and families.

**Cancer Focus Northern Ireland**
40–44 Eglantine Avenue, Belfast BT9 6DX
**Tel** 0800 783 3339 (Mon–Fri, 9am–1pm)
**Email** hello@cancerfocusni.org
**www.cancerfocusni.org**
Offers support to people affected by cancer, including a free helpline, counselling and links to local support groups.

**Cancer Support Scotland**
Calman Cancer Support Centre, 75 Shelley Road, Glasgow G12 0ZE
**Tel** 0800 652 4531
**Email** info@cancersupportscotland.org
**www.cancersupportscotland.org**
Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

**Irish Cancer Society**
43–45 Northumberland Road, Dublin 4, Ireland
**Tel** 1800 200 700 (Mon–Thu, 9am–7pm, Fri, 9am–5pm)
**Email** helpline@irishcancer.ie
**www.cancer.ie**
National cancer charity offering information, support and care to people affected by cancer. Has a helpline staffed by specialist cancer nurses. You can also talk to a nurse online and use the site’s message board.
Maggie’s Centres
1st Floor, One Waterloo Street, Glasgow G2 6AY
Tel 0300 123 1801
Email enquiries@maggiescentres.org
www.maggiescentres.org
Provide information about cancer, benefits advice, and emotional or psychological support.

Penny Brohn Cancer Care
Chapel Pill Lane, Pill, Bristol BS20 0HH
Tel 0845 123 2310
(Mon–Fri, 9.30am–5pm)
Email helpline@pennybrohn.org
www.pennybrohncancercare.org
Offers a combination of physical, emotional and spiritual support, using complementary therapies and self-help techniques.

Tenovus
Head Office, Gleider House, Ty Glas Road, Cardiff CF14 5BD
Tel 0808 808 1010
(Mon–Sun, 8am–8pm)
www.tenovus.org.uk
Aims to help everyone get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, an ‘Ask the nurse’ service on the website and benefits advice.

Support for young people
CLIC Sargent
Horatio House, 77–85 Fulham Palace Road, London W6 8JA
Tel 0300 330 0803
www.clicsargent.org.uk
Provides clinical, practical, financial and emotional support to children with cancer.
Teenage Cancer Trust
3rd Floor, 93 Newman Street,
London W1T 3EZ
Tel 020 7612 0370
www.teenagecancertrust.org
A charity devoted to improving the lives of teenagers and young adults with cancer. Runs a support network for young people with cancer, their friends and families.

Youth Access
1–2 Taylors Yard,
67 Alderbrook Road,
London SW12 8AD
Tel 020 8772 9900
(Mon–Fri, 9.30am–1pm and 2–5.30pm)
Email admin@youthaccess.org.uk
www.youthaccess.org.uk
A national organisation that provides counselling and information for young people. Support is given through local young people’s services. Find your local service via the website.

You can search for more organisations on our website at macmillan.org.uk/organisations, or call us on 0808 808 00 00.
Further resources

Related Macmillan information

You may want to order some of the resources mentioned in this booklet. These include:

• **Relationships, sex and fertility for young people affected by cancer**

• **Sexuality and cancer**

To order a booklet, visit [be.macmillan.org.uk](http://be.macmillan.org.uk) or call 0808 808 00 00.

All of our information is also available online at [macmillan.org.uk/cancerinformation](http://macmillan.org.uk/cancerinformation).

We have information about chemotherapy, radiotherapy and surgery in these languages: Bengali, Gujarati, Hindi, Polish, Punjabi, Russian, Traditional Chinese, Urdu and Welsh.

We also have a range of Easy Read booklets. Visit [macmillan.org.uk/otherformats](http://macmillan.org.uk/otherformats) to find out more.

Macmillan audiobooks

Our high-quality audiobooks, based on our variety of booklets, include information about cancer types, different treatments and about living with cancer.

To order your free CD, visit [be.macmillan.org.uk](http://be.macmillan.org.uk) or call 0808 808 00 00.

Macmillan videos

There are many videos on the Macmillan website featuring real-life stories and information from professionals.

There is a video about Robert and his experience of fertility treatments at [macmillan.org.uk/fertilityinmen](http://macmillan.org.uk/fertilityinmen).
Useful websites

A lot of information about cancer is available online. Some websites are excellent; others have out-of-date or misleading information. The sites listed here are considered by nurses and doctors to contain accurate information and are regularly updated.

**Macmillan Cancer Support**
**www.macmillan.org.uk**
Find out more about living with the practical, emotional and financial effects of cancer. Our website contains expert, accurate and up-to-date information on cancer and its treatment, including:

- all the information from our 150+ booklets and 360+ fact sheets
- videos featuring real-life stories from people affected by cancer and information from professionals
- how Macmillan can help, the services we offer and where to get support
- how to contact our cancer support specialists, including an email form for sending your questions
- local support groups search, links to other cancer organisations and a directory of information materials
- a huge online community of people affected by cancer sharing their experiences, advice and support.

**Cancer Research UK**
**www.cancerhelp.org.uk**
Contains patient information on all types of cancer and has a clinical trials database.

**Health and Social Care in Northern Ireland**
**www.n-i.nhs.uk**
The official gateway to health and social care services in Northern Ireland.
Healthtalkonline
www.healthtalkonline.org
www.youthhealthtalk.org
(site for young people)
Contains information about some cancers and has video and audio clips of people talking about their experiences of cancer and its treatments.

Macmillan Cancer Voices
www.macmillan.org.uk/cancervoice
A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

National Cancer Institute – National Institute of Health – USA
www.cancer.gov
Gives information on cancer and treatments.

NHS Choices
www.nhs.uk
NHS Choices is the online ‘front door’ to the NHS. It is the country’s biggest health website and gives all the information you need to make decisions about your health.

Patient UK
www.patient.co.uk
Provides people in the UK with good-quality 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.

Riprap
www.riprap.org.uk
Developed especially for teenagers who have a parent with cancer.
YOUR NOTES AND QUESTIONS
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 photographs are 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 our Chief Medical Editor, Dr Tim Iveson, Macmillan Consultant Medical Oncologist.

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Sources

We’ve listed a sample of the sources used in this publication below. If you’d like further information about the sources we use, please contact us at bookletfeedback@macmillan.org.uk


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.

5 WAYS YOU CAN HELP
SOMEONE WITH CANCER

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

Valid from Expiry date

Issue no Security number

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 taxpayer and I would like Macmillan Cancer Support to treat all donations I have made for the four years prior to this year, and all donations I make in the future, as Gift Aid donations, until I notify you otherwise.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax in each tax year, that is at least equal to the tax that Charities & CASCs I donate to will reclaim on my gifts. I understand that other taxes such as VAT and Council Tax do not qualify and that 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
More than one in three of us will get cancer. For most of us it will be the toughest fight we ever face. And the feelings of isolation and loneliness that so many people experience make it even harder. But you don’t have to go through it alone. The Macmillan team is with you every step of the way.

We are the nurses and therapists helping you through treatment. The experts on the end of the phone. The advisers telling you which benefits you’re entitled to. The volunteers giving you a hand with the everyday things. The campaigners improving cancer care. The community there for you online, any time. The supporters who make it all possible.

Together, we are all Macmillan Cancer Support.

For cancer support every step of the way, call Macmillan on 0808 808 00 00 (Mon–Fri, 9am–8pm) or visit macmillan.org.uk