BREAST
RADIOThERAPY — POSSIBLE LONG-TERM SIDE EFFECTS
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Breast radiotherapy – possible long-term side effects
About Breast radiotherapy – possible long-term side effects

This booklet gives information about the possible long-term (delayed) side effects of radiotherapy to the breast.

These side effects are rare and have become less common as radiotherapy planning techniques have improved. We’ve included all of the possible delayed side effects so that you can be aware of them. But it’s important to remember that you’re unlikely to get all of the side effects mentioned here. Many women only have mild, short-term side effects.

We hope this booklet answers some of your questions about dealing with long-term side effects of radiotherapy. It may help to read this information alongside our information about breast cancer and radiotherapy.

As the main audience for this information is women we use the term women throughout the text, but it’s also appropriate for men who have been treated for breast cancer.

We can’t advise you about the best treatment for yourself. This information can only come from your own doctor, who knows your full medical history.

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
Turn to pages 27–32 for some useful addresses and websites, and page 33 to write down questions for your doctor or breast care nurse.

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.

Radiotherapy

Radiotherapy treats cancer by using targeted high-energy rays to destroy cancer cells, while doing as little harm as possible to normal cells. Radiotherapy is a common part of the treatment of many cancers and can cure some cancers or help reduce the risk of them coming back after surgery. Radiotherapy may also be given to help relieve symptoms.

Radiotherapy is often used as part of your treatment for breast cancer. It’s given:

- **After surgery**: It’s commonly given after surgery that removes the breast lump and some of the breast tissue surrounding it (lumpectomy or a wide local excision), and sometimes after removal of the whole breast (mastectomy).

- **Before surgery**: Occasionally radiotherapy is given before, or instead of, an operation.

- **To the lymph nodes**: Sometimes radiotherapy is given to the lymph nodes in the underarm (axilla).
• **To the lymph nodes behind and above the collarbone (the supra clavicular nodes):** Radiotherapy may also be given to the lymph nodes in this area if it’s thought there is a risk they might contain cancer cells.

External radiotherapy is the main type of radiotherapy used to treat breast cancer. Less commonly a type of internal radiotherapy (also called brachytherapy) is used. This places a radioactive source close to the tumour. Our cancer support specialists can give you more information about this.

External radiotherapy is normally given as a series of short daily treatments in the radiotherapy department at the hospital, using a machine called a **Linear Accelerator** which produces high-energy x-rays. Treatment is usually given over 3–6 weeks, once a day Monday–Friday, with a rest at weekends. Treatment takes several minutes each day and is painless. It won’t make you radioactive and it is safe for you to be around other people, including children. Treatment is usually given as an outpatient.

Some women are also given a ‘boost’ dose of radiotherapy to the part of the breast where the cancer was located (known as the **tumour bed**). This is usually given after the main course of radiotherapy has finished.
Side effects of radiotherapy for breast cancer

Although radiotherapy can destroy cancer cells, it can also affect some of the normal cells in the treatment area. Your doctors will decide whether or not to recommend a particular radiotherapy treatment by weighing up the likely benefits of treating the cancer against the possible risks and side effects.

The benefits of the treatment usually outweigh the risk of developing delayed side effects.

You should be given the chance to discuss any possible side effects with your doctor. As there’s often a lot of information to take in, it may help to take a relative or friend with you when you see the doctor.

Radiotherapy affects people in different ways, so it can be difficult to predict whether you will develop any long-term problems. Most side effects of radiotherapy to the breast are temporary and disappear over a few weeks or months once the radiotherapy has finished. For a small number of women the side effects can become long-term problems that may develop months, or even years, later.

Developments in the way that radiotherapy is given have reduced the risk of side effects, and serious long-term problems are now very rare. However, because breast cancer is becoming more common, and treatment is now very successful, more women are living longer after treatment. As a result, the number of women with a long-term problem has slightly increased.
Most women will only need to have radiotherapy to the breast area, which makes the risk of developing serious delayed side effects very small indeed. However, some women will also need to have radiotherapy to the area under the arm (axilla) which can increase the risk of long-term problems. Long-term problems are more likely if radiotherapy is combined with the removal of all, or a large number of, the lymph nodes from under the arm.

This information is about the possible delayed side effects that may occur months, or years, after treatment.

**Radiotherapy can also cause some general side effects during treatment, such as tiredness or redness of the skin. These are discussed in our booklet *Understanding breast cancer.*
Possible delayed side effects

If you develop any new symptoms after your treatment is over, or if you’re concerned that the side effects you developed during your treatment aren’t getting better, you should contact your doctor, radiographer or breast care nurse at the hospital for advice. There is often a simple explanation for these symptoms and they don’t necessarily mean that you are developing long-term side effects.

Your doctor will probably want to do tests to find the possible cause of your symptoms. These may include x-rays, scans and specialist investigations, depending upon your particular symptoms. You may be referred to a doctor who specialises in treating long-term side effects of radiotherapy. These specialist doctors aren’t available in every hospital, so you may need to travel to see one.

The main long-term side effects are covered on the following pages (8–20).

Breast changes

Most women will develop changes in the look and feel of their treated breast after radiotherapy, although for many these changes are very slight.

Changes to the skin
During treatment some women develop a skin reaction similar to sunburn, known as erythema. The skin may become red and itchy, and if you have dark skin it may appear darker with a blue or black tinge. Usually this side effect will settle down 2–4 weeks after radiotherapy, but sometimes it can continue.
A few women find that their operation scar remains tender or sensitive for some time after radiotherapy.

Some women may develop changes which can include small red blotches on the breast caused by dilated blood vessels under the skin. This condition is known as **telangiectasia**. Although this affects how the breast looks, it shouldn’t cause any other problems.

**Skin care**
If you have a skin reaction, your doctor, nurse or the radiographer will give you advice on how to look after your skin. The following tips may be helpful:

- Avoid using perfumed soaps, talcum powder and deodorants/antiperspirants until the reaction has settled.
- Avoid shaving under your arm on the affected side.
- Showers are better than baths, and you should avoid soaking the affected area for too long if you have a bath.
- After washing, pat the area dry rather than rubbing it with a towel, or dry it with a hairdryer on a cool setting.
- Loose clothing may be more comfortable to wear.
- Avoid exposing the area to strong sunlight for at least a year, as your skin will continue to be more sensitive. If you do go out in the sun, apply sun block to the skin which has been treated by radiotherapy.

**Breast swelling**
A few women will develop swelling of the breast area during, or shortly after treatment. This swelling is known as **oedema**, and usually goes away a couple of months after treatment has
Breast radiotherapy – possible long-term side effects

finished, although in some women it may persist for months or years.

Sometimes, a different type of swelling called lymphoedema can develop. This can occur if the lymph nodes have been removed or are damaged by radiotherapy, causing a build-up of lymph fluid. It more commonly affects the arm (see page 16), but can also cause swelling of the breast.

Lymphoedema can develop many months or years after treatment has finished. Talk to your breast care nurse or doctor if you think you have lymphoedema. If necessary they can refer you to a lymphoedema specialist.

There is more information about lymphoedema in our booklet Understanding lymphoedema, which includes tips to help you avoid it and advice on how to reduce its effects.

Soreness or pain
Many women find that the area in the breast that has been treated feels uncomfortable or sore. This tends to become less of a problem year after year. If this happens and is causing you a problem, your doctor can prescribe painkillers to help relieve any pain. Some women find that the pain can be relieved by wearing a support bra. It can also help to wear a soft bra at night, but make sure the bra has no underwire.

Shrinking of the breast
It’s fairly common for the breast to shrink slightly over time, but for it to feel the same. A few women develop a hardening or thickening of the breast tissue (fibrosis). This can cause the breast to become harder and smaller than it was, although the effect is mostly very mild. In severe cases this can make the breasts look different to each other.
Some women find that as they get older their breasts tend to get bigger. Breasts can also get bigger as a result of gaining weight. A breast that has been treated with radiotherapy may not increase in size as much as the untreated breast. If this is a problem for you, talk to your doctor or breast care nurse, as a silicone shell (partial prosthesis) can be fitted to your bra. Surgery can also sometimes be done to correct an imbalance in size.

**Restricted arm and shoulder movement**

Radiotherapy can affect how well you can move your arm and shoulder. It’s fairly common for women who have radiotherapy to the area under the arm to experience some restriction in movement, especially if they’ve had surgery to their underarm area as well. This may make it difficult to carry heavy bags and do household chores or some types of exercise, such as swimming.

Before surgery, a physiotherapist should show you exercises to help improve the movement of the arm and shoulder. It’s a good idea to continue the exercises for a couple of years – your physiotherapist can tell you how frequently to do them. Any restrictions in movement should gradually improve after treatment, but some women continue to have problems. If you have problems, ask to see a physiotherapist again for advice.

If the arm and shoulder are painful, it can help to take painkillers before doing any exercises. Some women find that complementary therapies are helpful. There’s more information in our booklet *Understanding complementary therapies*. 
Changes in the way your heart works (cardiac complications)

There is a very small risk of damage to the heart muscle or the major blood vessels around the heart. This is only a potential problem if you have had cancer in your left breast, as the heart is on the left side of the chest. Radiotherapy is now very carefully planned, so that the heart is either not within the radiation area or only a small amount of the heart will receive any radiation. As a result, the risk of developing any heart problems is now very low.

If your heart has been damaged by radiotherapy you may find that you get tired very easily or get breathless on exertion, for example when climbing the stairs. You may also notice that you sometimes feel dizzy or get chest pains. It’s important to remember that these symptoms can be caused by many things and they aren’t always a result of damage to the heart.

Treatment for heart changes
The treatment will depend upon the part of the heart that has been damaged and how it’s affecting you. You may just be advised to avoid things that could cause further damage, such as alcohol, smoking and stress, or to improve your diet.

Treatment may include medicines to improve the heart rhythm (anti-arrhythmics), or improve the blood flow around the heart to help reduce chest pain (anti-anginals).

Your doctor or nurse will explain more about the treatment that you need and can answer any questions you have.
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Lung problems

A small number of women (around 1 in 50) develop symptoms such as breathlessness, a dry cough or chest pain. These may occur because the radiotherapy can damage the cells lining the lungs, causing inflammation or a hardening and thickening (fibrosis). This problem appears to be slightly more likely if you’ve had certain chemotherapy drugs at the same time.

These symptoms can develop 2–3 months after the radiotherapy has finished, or sometimes up to a year later. The changes are usually temporary, lasting a month or two, but occasionally can become a long-term side effect.

Your risk of developing lung problems is slightly higher if:

• radiotherapy is also given to the lymph nodes in the chest area
• you’ve had chemotherapy.

These symptoms may be made worse if you already have a lung problem such as asthma, or if you smoke.

Treatment for lung problems

Most lung problems are treatable and it’s unusual for them to continue over time. Treatment depends on exactly what is wrong with your lungs and may simply involve advice on cutting down or giving up smoking, and maintaining a healthy weight.

You may be given inhalers that contain drugs to help open up the airways (bronchodilators). Steroids can be given as tablets or inhalers to reduce inflammation. You may be given antibiotics if you have an infection in the lung.
Possible delayed side effects

Your doctor or nurse will explain more about the treatment you need and will teach you how to use an inhaler if necessary.

**Effect on the bones**

A rare late side effect of radiotherapy to the breast is damage to the bones, especially the ribs. This affects fewer than 1 in 100 women and is slightly more likely if you’ve had certain chemotherapy drugs at the same time. The bones can become thinner and more brittle. If this happens, it can cause pain and make it hard for you to lift heavy objects or to exercise.

It’s important to be aware that this problem can happen, so that if you have any symptoms you can get them checked by your doctor. Radiotherapy damage to the bones is very uncommon so it’s likely that if you have any symptoms there will be another cause.

**Treatment for bone damage**

Treatment relieves any symptoms that occur. This may involve taking painkillers or anti-inflammatory drugs. Sometimes calcium supplements, vitamin D, or drugs called bisphosphonates, which can help to strengthen the bones, may be helpful.

If you have pain, this can usually be controlled with painkillers. You may also need to see a physiotherapist or occupational therapist (OT) if the damaged bone is making it difficult to carry out daily activities. Very occasionally, surgery may be suggested to remove the damaged ribs.

Very rarely, if the bone has been severely damaged, a treatment known as **hyperbaric oxygen therapy** may help to prevent further weakening of the bone and improve symptoms.
This is a newer type of treatment and the exact benefits are still being researched. It’s not available in many places in the UK.

**We can send you information about controlling cancer pain and hyperbaric oxygen therapy.**

**Lymphoedema in the arm**

Lymphoedema is a type of swelling. It can occur if lymph nodes in the armpit have been removed or are damaged by radiotherapy. Lymph fluid normally flows along the lymph vessels and through the lymph nodes. If the lymph vessels are damaged, excess fluid may build up in the arm causing it to swell.

Lymphoedema can occur in women who had radiotherapy to the armpit as part of their treatment for breast cancer. It’s more common in women who’ve had surgery to remove most, or all, of the lymph glands in the area under the arm as well as radiotherapy to the underarm.

Lymphoedema in the arm can also occur after radiotherapy to the breast and chest wall, but this is very rare.

If your arm is swollen because of lymphoedema it may become stiff, uncomfortable and awkward to move. This can make daily activities like dressing difficult. The skin of your arm may become tight and stretched. Once lymphoedema occurs it can never be completely cured. However, many things can be done to help reduce the swelling and discomfort and allow women to use their arm normally.
Preventing lymphoedema
If you’re at risk of developing lymphoedema, it may help not to put too much strain on your lymphatic system. This means trying to avoid any infection or inflammation, as these can cause more lymph fluid to be produced and increase the risk of lymphoedema. It’s important to avoid getting any cuts or grazes on your arm. If you do get them, use antiseptic and plasters straight away and use moisturiser to keep your skin supple.

Treating lymphoedema
If you develop lymphoedema, you will usually be referred to a lymphoedema specialist for treatment and advice. This may be a nurse, physiotherapist or doctor. The treatment will depend upon how much lymphoedema you have, and aims to help reduce the swelling, prevent further swelling and relieve any discomfort. There are four main types of treatment:

• skin care
• supporting the arm using compression stockings or bandages
• positioning and movement, or exercising the arm
• a particular type of massage called manual lymphatic drainage (MLD) or simple lymphatic drainage (SLD).

Our booklet *Understanding lymphoedema* has more detailed information about preventing and treating lymphoedema.
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Numbness, pain and weakness in the arm

About 1 in 100 women who have radiotherapy to the underarm will develop some numbness and tingling in the hand, weakness in the hand, or pain around the shoulder, arm or hand. These symptoms will usually be mild but very occasionally may be more severe and troublesome.

The symptoms are due to damage to the nerves going into the arm, which can sometimes occur after radiotherapy to the armpit. These nerves are known as the brachial plexus and the long-term side effect is often called *radiation-induced brachial plexus neuropathy* or *brachial plexopathy*.

Treating brachial plexopathy

Usually this is a mild symptom. But, if severe brachial plexopathy develops it can’t be reversed. However, treatments can help to control symptoms such as pain, and make the practical aspects of life easier.

One of the priorities of treatment is to find the best way of controlling the pain. People often describe the pain as ‘shooting’ or ‘burning’, but you may also have pins and needles, numbness or tightness. There are various painkillers that may be helpful, depending upon how severe the pain is, and your doctor can advise you about these. They may prescribe low-dose antidepressants or antiepileptic drugs, as these can be effective in controlling nerve pain. You may be referred to a specialist pain clinic for further advice.

Your doctors may also suggest other treatments, such as massage or applying heat and cold to the painful areas. Another possibility is using a TENS (transcutaneous electrical nerve stimulation) machine. This can be very effective at
relieving pain. It involves placing sticky pads that contain electrodes onto your skin. A weak electrical current is passed through the pads. The electrical current can make the body release its own natural painkillers (endorphins), which can help control pain.

Some women find acupuncture helpful, and some GP or hospital clinics now offer this. Other complementary therapies may also be useful, but you should always discuss these with your doctor first.

We can send you a booklet about cancer and complementary therapies.

You may be referred to a physiotherapist and an occupational therapist (OT). A physiotherapist will help you keep your arm as mobile and strong as possible. This will involve exercises to strengthen the muscles and keep them supple. They will also be able to show you how to use slings or splints to support your arm. The OT will assess how the nerve damage has affected the use of your arm, and look at how this interferes with your daily life. The physiotherapist and OT can then suggest practical ways to help you carry on as normally as possible.

If you aren’t able to work because of the damage to your arm, you may be entitled to some benefits. A social worker, either at the hospital or in the community, or your local Jobcentre Plus office can advise you about this. You can find details of your local Jobcentre Plus office and get more information about benefits on the Department for Work and Pensions public services website direct.gov.uk
Our booklets, Work and cancer and Self-employment and cancer have helpful information about work, disability and financial issues. We can also send you a copy of Help with the cost of cancer.

Radiation-induced second cancers

This is a very rare long-term problem following radiotherapy for some types of cancer, including cancer of the breast. Less than 1 in 1,000 women will develop a second cancer, such as a sarcoma, within the treatment area. This can occur many years later. Second cancers are very rare but any new symptoms should always be checked with your doctor.
Your feelings

You may have all kinds of emotions if you are diagnosed as having damage caused by your radiotherapy treatment. Radiotherapy damage is uncommon and it can take a long time to find out that the problem is related to radiotherapy. You may feel angry about this. You may be relieved that you now know the reasons for your symptoms, or feel cheated that you have survived cancer only to be damaged by the treatment. You may be worried about how you will cope with any disability, or worried about money problems if you have to give up work.

These are all normal reactions and part of the process that many women go through. Everyone has their own way of coping. Some women find it helpful to talk to friends or family members, while others prefer to seek help from people outside their situation, such as counsellors. Many people find support through online forums where they can share experiences with others in a similar situation. Others prefer to keep their feelings to themselves. There is no right or wrong way to cope, but help is there if you need it.

A number of organisations and support groups can help and support you. Our cancer support specialists can give you details of those that are local to you.

Our booklet *The emotional effects of cancer* discusses the feelings you may experience and has advice on how to cope with them.
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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 information in a variety of formats, including booklets, leaflets, fact sheets, and audio CDs. We can also provide our information in Braille and 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.

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 healthcare 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

Breast Cancer Care
5–13 Great Suffolk Street,
Southwark, London SE1 0NS
**Helpline** 0808 800 6000
(Mon–Fri, 9am–5pm,
Sat, 9am–2pm)
**Tel (admin)** 0845 092 0800
**Tel (text)** 0808 800 6001
**Email**
info@breastcancercare.org.uk
**www.breastcancercare.org.uk**
Provides information, practical help and emotional support to anyone affected by breast cancer. Specialist breast care nurses run the helpline. The Lavender Trust also runs from Breast Cancer Care, offering information and support specifically for younger women with breast cancer.

Lymphoedema Support Network
St Luke’s Crypt, Sydney Street,
London SW3 6NH
**Info and support line** 020 7351 4480
**Email** adminlsn@lymphoedema.freeserve.co.uk
www.lymphoedema.org
A national charity that provides information and support to people affected by lymphoedema.

RAGE (Radiotherapy Action Group Exposure)
**Tel** 01892 557804
**Email** janice.millington@btinternet.com
**www.rage.webeden.co.uk**
For women who have survived breast cancer but have been damaged by radiotherapy treatment.

General cancer and support organisations

Cancer Black Care
79 Acton Lane,
London NW10 8UT
**Tel** 020 8961 4151
(Mon–Fri, 9.30am–4.30pm)
**Email** info@cancerblackcare.org
**www.cancerblackcare.org**
Offers a range of information and support for people with cancer from ethnic
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... communities, their friends, carers and families. Welcomes people from different ethnic groups including African, Asian, Turkish and West Indian communities.

**Irish Cancer Society**
43–45 Northumberland Road, Dublin 4, Ireland
**Cancer Helpline**
1800 200 700 (Mon–Thurs, 9am–7pm, Fri, 9am–5pm)
**Email** helpline@irishcancer.ie
**www.cancer.ie**
Operates Ireland’s only freephone cancer helpline, which is staffed by qualified nurses trained in cancer care

**Maggie’s Centres**
8 Newton Place, Glasgow G3 7PR
**Tel** 0300 123 1801
**Email** enquiries@maggiescentres.org
**www.maggiescentres.org**
Located throughout the country, Maggie’s Centres are places to turn to for anyone affected by cancer. You can access information, benefits advice, and emotional or psychological support free of charge and under one roof. You don’t have to make an appointment or be referred.

**Tak Tent Cancer Support – Scotland**
Flat 5, 30 Shelley Court, Gartnavel Complex, Glasgow G12 0YN
**Tel** 0141 211 0122
**Email** taktent4u@gmail.com
**www.taktent.org**
Offers information and support for cancer patients, families, friends and health professionals. Runs a network of monthly support groups across Scotland. Also provides counselling and complementary therapies.

**Tenovus**
9th Floor, Gleider House, Ty Glas Road, Llanishen, Cardiff CF14 5BD
**Freephone helpline**
0808 808 1010
**Tel** 029 2076 8850
**Email** post@tenovus.com
**www.tenovus.org.uk**
Based in Wales, Tenovus provides a range of services to people with cancer and their families, including...
counselling and a freephone cancer helpline.

**The Ulster Cancer Foundation**
40–44 Eglantine Avenue, Belfast BT9 6DX
**Freephone helpline**
0800 783 3339
**Helpline email**
infocis@ulstercancer.org
**Tel** 028 9066 3281
**Email** info@ulstercancer.org
**Website** www.ulstercancer.org

Provides a range of services to people with cancer and their families, including a free telephone helpline, which is staffed by specially trained nurses with experience in cancer care.

**Support for carers**

**Carers UK**
20 Great Dover Street, London SE1 4LX
**Tel** 020 7378 4999
**Carers line** 0808 808 7777 (Wed and Thurs, 10am–12pm and 2–4pm)
**Email** info@carersuk.org
**Website** www.carersuk.org

Offers information and support to carers. Can put people in contact with support groups for carers in their area. Has national offices for Scotland, Wales and Northern Ireland:

**Carers Scotland**
The Cottage, 21 Pearce Street, Glasgow G51 3UT
**Tel** 0141 445 3070
**Email** info@carerscotland.org
**Website** www.carerscotland.org

**Carers Wales**
River House, Ynsbridge Court, Gwaelod-y-Garth, Cardiff CF15 9SS
**Tel** 029 2081 1370
**Email** info@carerswales.org
**Website** www.carerswales.org

**Carers Northern Ireland**
58 Howard Street, Belfast BT1 6PJ
**Tel** 028 9043 9843
**Email** info@carersni.org
**Website** www.carersni.org
Financial and legal advice

Benefit Enquiry Line
2nd Floor, Red Rose House, Lancaster Road, Preston, Lancs PR1 1HB
Tel 0800 882 200
Textphone 0800 243 355
Email BEL-Customer-Services@dwp.gsi.gov.uk
www.direct.gov.uk/en/DI1/Directories/DG_10011165
Provides advice about benefits, and can also provide help to complete some disability related claim packs.

Citizens Advice Bureau
Find contact details for your local office in the phone book or at citizensadvice.org.uk
Find advice for the UK online, in a range of languages, at adviceguide.org.uk
Citizens Advice Bureaus provide free, confidential, independent advice on a variety of issues including financial, legal, housing and employment.

Citizens Advice Scotland
www.cas.org.uk

Further resources

Audiotapes and CDs

Our high-quality audio materials, based on our range of booklets, include information about cancer types and different treatments. They also give advice about living with cancer.

To order your free CD or tape visit be.macmillan.org.uk or call 0808 808 00 00.

Useful websites

A lot of information about cancer is available on the internet. Some websites are excellent, others have misleading or out-of-date information. The sites listed on the following pages are considered by nurses and doctors to contain accurate information and are regularly updated.
Further resources

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 treatments, including:

• our 100+ booklets, 300+ fact sheets, and cancer Q&As
• 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.

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

www.cancer.org
(American Cancer Society)
Nationwide community-based voluntary health organisation dedicated to eliminating cancer as a major health problem. It aims to do this through research, education, advocacy and service.

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

www.healthtalkonline.org
www.youthhealthtalk.org
(site for teens and young adults)
Both websites contain information about some cancers and have video and audio clips of people talking about their experiences of cancer and its treatments.
www.nhs.uk (NHS Choices)
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 choices about your health.

www.nhsdirect.nhs.uk (NHS Direct Online)
NHS health information site for England – covers all aspects of health, illness and treatments.

www.nhsdirect.wales.nhs.uk (NHS Direct Wales)

www.nhs24.com (NHS 24 in Scotland)

www.patient.co.uk (Patient UK)
Aims to provide non-medical people in the UK with good-quality information about health and disease. Includes evidence-based information leaflets on a wide range of medical and health topics. Also reviews and links to many health and illness related websites, some of which are overseas.
Questions you might like to ask your doctor or nurse

You can fill this in before you see the doctor or nurse, and then use it to remind yourself of the questions you want to ask, and the answers you receive.

1. 
Answer

2. 
Answer

3. 
Answer

4. 
Answer

5. 
Answer

6. 
Answer
Disclaimer

We make every effort to ensure that the information we provide is accurate but it should not be relied upon to reflect the current state of medical research, which is constantly changing. If you are concerned about your health, you should consult a doctor. Macmillan cannot accept liability for any loss or damage resulting from any inaccuracy in this information or third party information such as information on websites to which we link. We feature real life stories in all of our articles. Some photographs are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support’s information development nurses and editorial team. It has been approved by our medical editor, Dr Terry Priestman, Consultant Clinical Oncologist. With thanks to: Morven Angus, Breast Specialist Nurse; Professor Michael Dixon, Consultant Surgeon and Senior Lecturer; Vicki Harmer, Specialist Breast Care Advisor; Dr David Morgan, Consultant Clinical Oncologist; and the patient reviewers.

Sources

UpToDate Online. Techniques and complications of breast and chest wall irradiation for early stage breast cancer. www.uptodate.com (accessed 5 May 2010).
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 regular or 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

Issue no

Signature

Date / / 

Don’t let the taxman keep your money

Do you pay tax? If so, your gift will be worth almost a third more to us – at no extra cost to you. All you have to do is write your name 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 six years prior to this year and all donations I make in future as Gift Aid donations, until I notify you otherwise.

I understand that I must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that Macmillan will reclaim on my gifts for that tax year.

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
Cancer is the toughest fight most of us will ever face. If you or a loved one has been diagnosed, you need a team of people in your corner, supporting you every step of the way. That’s who we are.

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 supporting you online, any time. The fundraisers who make it all possible.

You don’t have to face cancer alone. We can give you the strength to get through it. We are Macmillan Cancer Support.

Questions about living with cancer? Call free on 0808 808 00 00 (Mon–Fri, 9am–8pm) Alternatively, visit macmillan.org.uk
