

Body image and cancer





“ Being able to vent frustration and express my fears amongst people going through similar things was incredibly helpful to me, and it was an opportunity to laugh as well as cry! ”

Penny, who had concerns about body image after breast cancer

About this booklet

This booklet is about how cancer and its treatment may affect your body image. This is the way you think and feel about your body.

Treatments like surgery, chemotherapy, radiotherapy, hormonal therapy and targeted therapies can change the way your body looks, works or feels. People affected by cancer are often worried about their body image. There are things you can do to improve your body image, and ways to get help and support.

This information is for anyone who is worried about changes to their body caused by cancer or cancer treatment. We hope it helps you deal with some of the questions or feelings you may have.

How to use this booklet

This booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you.

It is fine to skip parts of the booklet. You can always come back to them when you feel ready.

On pages 70 to 72, there are details of other organisations that can help. There is also space to write down questions and notes (see page 73).

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.

Quotes

In this booklet, we have included quotes from people who have had body image concerns. Some are from our Online Community ([macmillan.org.uk/community](https://www.macmillan.org.uk/community)). The others are from people who have chosen to share their story with us. This includes Penny, who is on the cover of this booklet. To share your experience, visit [macmillan.org.uk/shareyourstory](https://www.macmillan.org.uk/shareyourstory)

For more information

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm, or visit [macmillan.org.uk](https://www.macmillan.org.uk)

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using NGT (Text Relay) on **18001 0808 808 00 00**, or use the NGT Lite app.

We have some information in different languages and formats, including audio, eBooks, easy read, Braille, large print and translations. To order these, visit [macmillan.org.uk/otherformats](https://www.macmillan.org.uk/otherformats) or call **0808 808 00 00**.

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Body image

Body image is the picture in our mind of how our body looks and works. It is how we think and feel about our bodies and how we believe others see us.

Body image is important as it can be linked to feelings of self-worth.

Cancer and its treatments can change your body and how you feel about it. Because of this, body image concerns are common in people affected by cancer. People of any age or gender and with any type of cancer can have body image concerns.

Changes to your body may be temporary or permanent. They include changes that can be seen by others, such as hair loss or weight gain. They also include changes that are not obvious to others. For example, treatment effects such as infertility can also affect your body image and make you feel vulnerable about your body.

Body image concerns are different for everyone. Some people may feel uncomfortable or unhappy about their bodies. Others may feel anxious and avoid going out or socialising. Concerns about your body may make you feel less feminine or less masculine.

There are things you can do to improve your body image. There are also different ways to get help and support.

Cancer and body changes

Cancer and its treatments can cause changes to your body that make you worry about your body image. Body changes can affect:

- how your body looks
- how it works
- how it feels.

'The effects of treatment and surgery had profound effects on my body and my body image.'

Penny

Possible body changes

We do not list all the possible body changes here. You may be coping with more than one change. Common visible changes include the following:

- **Hair loss.** You may lose some or all of the hair from your head, and sometimes your eyebrows, eyelashes and body hair. This is usually a side effect of chemotherapy. Radiotherapy to the head also causes hair loss. Hormonal therapy and some targeted therapy drugs may cause your hair to thin.
- **Scarring from surgery, or losing a part of your body, such as a breast or a limb.** You may decide to wear a prosthesis (false part) to replace a part of your body that has been removed. If you had a mastectomy, you may choose to have breast reconstruction.
- **Changes in how your body works after certain types of surgery.** For example, some people have part of the bowel or bladder removed and have a stoma made. This is an opening on the tummy that stools (poo) or urine (pee) pass out of. Some people have their voicebox (larynx) removed and breathe and speak through an opening (stoma) in their neck.
- **Losing weight or gaining weight.** The effects of treatments or the cancer may cause you to lose weight. Some chemotherapy drugs, steroids and hormonal therapies can cause weight gain.
- **Skin changes.** Rashes, redness, dry skin or acne can be side effects of chemotherapy, targeted therapies, hormonal therapies or steroids. Radiotherapy can affect the skin colour in the treated area or cause broken veins to appear later.

- Swelling of an arm, leg or other part of the body. This is called lymphoedema.
- Changes in the way you speak, eat or breathe.
- Changes in your movement, balance or co-ordination.

We have more information about these changes. You might find the following booklets helpful (see page 66):

- **Coping with hair loss**
- **Understanding breast reconstruction**
- **Understanding lymphoedema**

Body changes that you cannot see include the following:

- Infertility or having an early menopause.
- Reduced sex drive or difficulties having sex (see pages 33 to 34).
- Feeling tired and weak or being unable to do activities you did before treatment.
- Late effects of treatment that change the way your bladder or bowel work.
- Changes in sensation. For example, this could be numbness in part of your body after surgery, or in your hands and feet after chemotherapy (peripheral neuropathy).

We have more information about coping with these changes on our website. You may also want to order our booklet **Managing the late effects of bowel cancer treatment** (see page 66).

How concerns about body image may affect you

Body image concerns may begin before your treatment starts, during treatment or after treatment finishes. How much they affect you is different for everyone. You may feel more self-conscious about your body but find it manageable. Or you might think about your concerns a lot of the time and find this upsetting.

You may feel:

- less confident
- anxious about people's reactions to you
- worried about going out and meeting people
- as if you have lost a part of yourself or are not the person you used to be
- worried about your relationship or about starting a new relationship
- less feminine or less masculine.

You may also feel angry, anxious or sad. These are normal feelings when you are coping with cancer and changes to your body. You may feel a sense of loss.

Talking openly with people close to you about how you feel can be helpful. This could be your family, close friends, cancer doctor or specialist nurse. Talking to another person who has been through something similar can also help. There are different types of support to help you to cope.

You may find our booklet **Talking about cancer** helpful (see page 66).

Some people may come to value how their bodies coped with cancer and its treatment. They may see their changes as signs of their survivorship. Other people find it reassuring that people close to them appreciate them for who they are, not for their appearance.

'It's important to get those emotions out. Don't hold back on them. Whether that be with friends, family, or if you feel you need counselling, just get it out.'

Amanda

Getting used to the changes

It takes time to get used to body changes. Try to allow yourself time for this to happen and be kind to yourself.

Before treatment, your cancer doctor and specialist nurse should explain what to expect. This can help you feel more prepared and may make you less anxious. Understanding more about treatment side effects and how to manage them can also help.

If you have a body change such as a stoma, your specialist nurse should show you how to manage it. There are also support organisations that can usually put you in touch with someone who has been through a similar experience (see pages 70 to 72). Or you could look for support online.

If you have a visible body change, such as a scar or stoma, try to look at it as soon as you can. You can do this with someone close to you, your specialist nurse or cancer doctor, or on your own. Do not be afraid to ask others for support when you look at it for the first time. Delaying this often makes it more difficult to accept the change. At first, you may feel shocked and upset. But these feelings can lessen as you begin to get used to the change.

It may help to look at your body change in stages, for example:

- start by looking at the area when it is covered up
- move on to looking at it uncovered
- slowly build up to touching the area.

You might find it helpful to use a mirror when you start to look at the change in your body. If you find it is not getting easier, always ask your nurse or doctor for help.



Anxiety

This is a common feeling when you are concerned about your body. You may feel anxious about people's reaction to how you look, or how your relationships may be affected.

Everyone feels anxious at times. But it becomes a problem when it affects your day-to-day life. You may find our booklet **How are you feeling? The emotional effects of cancer** helpful (see page 66).

When we feel threatened, our bodies release a hormone called adrenaline. This causes the physical symptoms we get when we are very anxious. These include:

- feeling breathless or overbreathing (hyperventilating)
- feeling your heart is beating too fast
- tight, aching muscles
- feeling dizzy or sick
- a dry mouth or sweating
- needing to go to the toilet more often.

Avoidance

You may try to avoid situations or things that make you feel anxious. This may be a relief in the short term, but can make things more difficult in the long term. You may keep feeling anxiety and fear for longer. It means you do not give yourself the chance to find out whether facing your fears is as difficult as you think.

You may find that you are:

- avoiding looking at or dealing with a body change
- not going out or socialising
- avoiding looking in a mirror
- not getting involved in situations that may lead to being intimate with someone
- not doing activities that involve going to communal changing rooms, such as going to the gym or swimming pool or going clothes shopping.

There are different ways to help you cope with anxiety and avoidance. There are things you can do for yourself, with the support of family or friends. Or you may feel you need further help from a doctor or nurse.

Getting help to understand your fears and working towards taking back control can help reduce them. You may also realise that other people see you in a different and more positive way than you imagined.

'As the days and weeks went on, I did struggle with looking into the mirror, because I had changed so much.'

Lurline

Depression

It is natural to feel sad and low at times when you are coping with cancer and body changes. If this continues or gets worse, you may be depressed.

Sometimes other people may notice it first and talk to you about getting help. Symptoms of depression can include:

- having a low mood most of the time
- crying a lot or feeling unable to cry
- getting little pleasure out of life
- feeling very tired
- being unusually irritable
- having difficulty concentrating or making decisions
- finding it difficult to sleep, waking up early, or sleeping more than usual
- having a poor appetite or losing weight.

If you think you might be depressed, talk to your GP, cancer doctor, specialist nurse or other healthcare professional at the hospital. They can listen and refer you for professional support from a counsellor or psychologist. They may talk to you about also taking prescribed drugs to help treat depression.



A woman with short, styled grey hair and black-rimmed glasses is seated on a red upholstered chair. She is wearing a dark blue long-sleeved top and a multi-strand pearl necklace. She is looking down at a tablet computer held in her lap, with her hands positioned as if interacting with the screen. The background shows a blurred indoor setting with a wicker chair and a window with light coming through.

'Seeing the effects of the treatment on my body was emotional. Sometimes it was hard to see family and go to social events as my changed looks made me feel that I stood out so much.'

Penny

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Managing anxiety and other feelings

There is support available to help you manage anxiety. There are also things you can do to help yourself.

Talking to other people

Try to talk to people you trust and who you feel comfortable with. This may be family or friends, or your doctor, nurse or other healthcare professional. Putting your concerns into words may help you feel less anxious and more in control. It can help you to make more sense of your situation and put things into perspective.

Sometimes people try to reassure you too much or tell you not to worry. Explain that what you need is someone who will listen.

Healthcare professionals can offer help and support, including:

- giving you information and practical advice on coping
- helping you look at different ways to reduce anxiety
- referring you to a counsellor or psychologist
- prescribing medicines to help if you need them.

You could also talk to someone from a support group, an online forum or a support organisation. These give you a chance to talk to other people facing similar challenges.

You may find our booklet **Talking about cancer** helpful (see page 66).

What you can do

Some of the following suggestions may help you feel less anxious:

- Cut down on caffeine and alcohol.
- Try to get enough sleep. If you have difficulty sleeping, ask your GP for advice.
- Do regular physical activity. This can help reduce stress and anxiety. Activities like yoga combine physical activity with controlling your breathing. We have more information in our booklet **Physical activity and cancer** (see page 66).
- Practise exercises that involve learning to relax your breathing or your body (see page 22). Your GP may be able to refer you to a healthcare professional who can show you these techniques.
- Use a picture in your mind (visualisation) of a place and time you felt relaxed and happy. Concentrating on how you felt at that time may help you feel less anxious in the present.
- Meditation or mindfulness may help you calm your mind and focus on the present moment (see page 26).
- Complementary therapies, such as massage, aromatherapy, reflexology or acupuncture may help some people to relax. You can find out more in our booklet **Cancer and complementary therapies** (see page 66).

Relaxed breathing exercises

You can do these lying down, sitting in a chair or standing up. To begin with, try to practise them regularly, when you are not anxious.

Your breathing should be slow and gentle but not deep, as this can make you light-headed.

Step 1 – Make sure your shoulders, head and neck are relaxed and supported if you are sitting or lying down.

Step 2 – Place one hand on your chest and the other just below your ribcage.

Step 3 – Slowly and gently breathe in through your nose and feel your tummy (abdomen) move out.

Step 4 – After a full breath, pause for a moment then slowly and gently breathe out through your mouth.

Try doing this for 5 minutes, once a day. Then gradually try to build it up to 3 times a day.

Write things down

It can help to write about how you feel in a journal or diary. For example, you may find it helpful to use the hopes and fears tool on the opposite page. There is space for you to think about the next steps you could take to help you manage your concerns. The thinking tool on was written by people affected by cancer. You can find more tools, stories and help using the tool at **thinkaboutyourlife.org** If you have any comments about this thinking tool, please email **cancerinformationteam@macmillan.org.uk**



Hopes



Fears

Next steps

Support organisations

There are different resources that give advice on managing anxiety. The NHS has content on stress and anxiety, and there is information on Anxiety UK's website (see page 72). They also have booklets, DVDs, CDs and podcasts to help guide you at home.

Facing your fears

When you are coping with changes to your body, it is common to avoid situations that make you feel anxious.

Here is an example of how facing your fears can sometimes reduce anxiety and help you feel more confident.

Example

Anita's hair was growing back after treatment but was still very short for her. She planned to meet a friend for lunch, but felt anxious about going out for the first time without her wig. She chose a quiet hotel and agreed to meet her friend in the reception area.

Anita did not know that there was a big event at the hotel that day, and that people she knew would be there. When she realised, her first reaction was to leave straight away. But she did not want to let her friend down, so she stayed and waited anxiously.

Her anxiety quickly passed as people she knew came up to her and were clearly happy to see her. They did not seem to notice her hair, and people she did not know just carried on as usual.

We have a video on our website of Amanda, Doug and Lurline talking about how hair loss affected them and how they coped. Visit [macmillan.org.uk/hairloss](https://www.macmillan.org.uk/hairloss)

When you may need help

If your body image concerns are difficult to cope with, talk to your doctor or nurse. Tell them if you feel anxious or upset a lot of the time, or think you may be depressed. These are normal reactions. But if they do not improve or are overwhelming, it is important to get help.

You may need help if you:

- find it hard to look at yourself after treatment
- avoid socialising or doing hobbies or sports you did before because of body changes
- feel very unhappy with your appearance or spend a lot of time 'fixing' your appearance
- are having difficulties in your intimate relationship with your partner.

Your doctor can refer you to a counsellor or psychologist. They usually refer you for a type of talking therapy. This can help you understand your feelings better and learn new ways of managing your problems. They may also prescribe medicines to help.

Cognitive behavioural therapy (CBT)

CBT is a talking therapy that helps you understand how to change your thinking. It helps you to identify and challenge unhelpful thinking patterns and behaviours.

You learn to replace unhelpful thoughts with more realistic balanced ones. You develop skills to help you react more positively in situations that make you feel anxious. This can help you to cope more positively when you feel anxious, helpless or depressed. It can be a helpful therapy for people with body image concerns.

There are online CBT services approved by the NHS that you can do yourself. Check online NHS information services in your area to see what is available.

But if you are struggling with difficult feelings it is best to talk to your doctor or nurse for advice. They can refer you to a psychologist or counsellor trained in CBT. CBT and other forms of therapy are available on the NHS. A psychologist will talk to you about what you need and set goals with you.

Mindfulness

Mindfulness helps you become aware of your thoughts and feelings, without judging them or becoming overwhelmed by them. It uses techniques like meditation, breathing exercises and yoga to help you focus on the present moment.

Mindfulness-based cognitive therapy (MBCT) uses the techniques of mindfulness with CBT. Some hospitals may offer MBCT classes on the NHS.



Managing other people's reactions

If you have visible changes to your appearance, you may worry about how other people will react.

You may find that some people look at you for longer. Usually this is because they are curious and not because they want to upset you. For example, if you have lost your hair and are not wearing a wig, people may not be used to seeing this.

Sometimes people may make insensitive remarks or unwelcome suggestions. But you will probably find that most people take much less notice than you expected.

Learning how to cope with social situations in advance can build your confidence. This will help you gradually get back to things you did before, such as work, sports or hobbies.

Being assertive

Assertiveness means facing situations that worry you with confidence instead of avoiding them. Learning to be assertive can help you communicate better with other people. It means giving your point of view, being able to ask for help and knowing you have the right to:

- be treated with respect
- say what you need
- make a request
- be honest.

Dealing with awkward questions

Being assertive can help you to manage situations where people might ask questions.

People may want to ask questions to see how you are, or understand what has happened. It can help to think about the questions they may ask you. You cannot know exactly how a conversation will go. But try to think about what you want to say and the best way of saying it. You could rehearse this with a friend or by yourself.

What you tell other people depends on:

- how much you want to say
- how you feel about the changes to your body
- your relationship with the other person
- where you are and whether other people are around.

You can think of different responses, to help prepare you. You might want to talk about the subject yourself at the right time in a conversation. This can help you feel more in control.

Or you could say you do not want to talk about it. You could smile (even if you don't feel like it) and reassure them you are fine. Most people ask questions because they are concerned, so this is a good way of stopping the conversation without causing tension.

You could give a short response and distract the person by asking them a question or changing the subject.

Keep what you want to say clear and to the point. You do not need to give long explanations. Look at the other person, stand or sit upright and keep a calm tone of voice.

Here are some examples of things you could say:

- 'Thank you for asking, but I would rather not talk about it at the moment. Don't worry, I'm doing fine.'
- 'I had an operation to remove a cancer a few weeks ago and I'm recovering well. How are you – what have you been doing lately?'
- 'I have lost my hair because I'm having chemotherapy. It will grow back when my treatment is finished.'
- 'You may have noticed my weight has changed. It's a side effect of some drugs I'm taking for my cancer treatment.'
- 'I had my operation to remove the cancer and I'm getting used to the changes, but it will take a while.'



Using social skills

Social skills can help you take control of difficult situations and manage other people's reactions. If you are feeling anxious or low, it can be hard to appear confident and sociable. But doing something that makes you nervous until you are used to it can help you overcome anxiety.

Try these approaches:

- Engaging with people – making eye contact, smiling and nodding tells people you are approachable.
- Posture – standing with your shoulders back and head up makes you look confident and assertive, even if you don't feel that way.
- Presentation – the way you present yourself shows other people how you feel about yourself. Try wearing clothes and accessories that make you feel more confident (see pages 40 to 45).

These skills are not difficult to learn, but you may need to practise them. They can gradually help you become more confident in managing social situations.

Staring or negative comments

If someone is staring at you, it can feel uncomfortable or upsetting. They are more likely to be staring because they are curious than because of any negative feelings towards you. They may not even be aware they are staring.

It is okay to let them know that you are aware of it and want it to stop. Try these approaches. If one does not work, move on to the next:

- Look back, smile at them or nod – most people smile back and look away.
- If it continues, maintain eye contact. For example, try raising your eyebrows or giving an assertive look or nod to help them to realise.
- Ask a direct question – for example, ‘Can I help you?’ This usually makes them aware of what they are doing and makes them stop staring.
- Tell them in a simple, assertive way that you would like it to stop. You could say something like ‘Can you please stop staring at me? It’s only a scar.’

If you are in a situation where you cannot walk away and do not want to draw attention, distract yourself by reading a book or newspaper. Holding it up in front of you can help stop the staring. Young children sometimes ask blunt questions out of curiosity. Try giving them a simple explanation they can understand. This is usually all you need to do.

Sexuality, intimacy and body changes

Physical and emotional changes after cancer and its treatment may affect your sexual confidence or ability to have sex. This could:

- cause difficulties with your partner, if you have one
- delay you having sex again after treatment
- affect any new relationships.

Concerns about your sex life and intimate relationships are normal. If you are in a relationship, you may worry your partner will compare things to how they were before. Or you may worry they no longer find you attractive. But how attractive they find you is linked to different things, not to how a part of your body looks.

If you are not in a relationship, you may worry about how a new partner might react to your body changes. Many people with cancer go on to have close and intimate relationships in the future.

You usually need time to recover and adapt to body changes before you feel comfortable about having sex. How long this takes depends on the treatment you had and what feels right for you and your partner.

Partners may also have concerns. Talking openly with each other can have a positive effect on your relationship. It can make you feel more comfortable with each other.

Even if you do not feel like having sex, you may still want to be close to your partner. Focusing on non-sexual intimacy can help you feel close to each other. This could be spending more time together, holding hands, hugging, kissing or giving each other a massage. This intimacy can help you slowly get back to having sex again.

If difficulties with your sex life do not improve, talk to your doctor or specialist nurse. Try not to feel embarrassed. They are used to giving advice on intimate problems. They can give information on how to improve sexual difficulties. Or they can give advice about different ways of looking at problems. They can also refer you to a psychosexual therapist if needed.

If you identify as LGBT+, you may worry about being treated insensitively by your healthcare team. But you may have some specific questions. Having your sexual or gender identity acknowledged may help you feel better supported. It also means your healthcare team can give you the right information and advice.

If you feel unable to talk to your healthcare team about your sexuality, the LGBT Foundation has a helpline that can give you confidential advice and support – call **0345 330 3030** (see page 72).

We have more information about cancer, sex and relationships in print and on our website (see page 66).

What can help – practical advice

There are ways to help you manage your body changes and improve your confidence. You need to talk to your cancer doctor or specialist nurse about some of these things. You can do others with support from family or friends.

Getting information

Before treatment, your cancer doctor and nurse will give you information to prepare you. They will tell you how the treatment is likely to affect you. They will explain any options, such as reconstructive surgery, and can help you make decisions.

They can also:

- tell you about possible side effects and what may help, such as cold cap treatment that may help reduce hair loss
- refer you to other members of the team, for example occupational therapists, physiotherapists or speech and language therapists (SLTs)
- refer you for services such as counselling, if you think that would be helpful
- arrange for a second opinion about your treatment, if you feel this would be useful.

Always tell your cancer doctor or specialist nurse if you have body image concerns during or after treatment. There are different ways they can help and support you.

Reconstructive surgery

Reconstructive surgery is most commonly needed after some types of surgery to remove the cancer. For example, a woman may choose reconstructive surgery after having a breast removed (mastectomy). Another example is when a surgeon replaces tissue or nerves removed during treatment for head and neck cancer or skin cancer.

Reconstructive surgery may help you feel more confident about your appearance. Breast reconstruction can be done straight away or years after a mastectomy.

If you had surgery to remove only part of the breast, you can have surgery to improve the shape. Your cancer doctor or breast care nurse will talk to you about this. They can refer you to a specialist surgeon. We have more information in our booklets **Understanding breast cancer in women** and **Understanding breast reconstruction** (see page 66).

Improving how a scar feels and looks

Scars usually improve in how they feel and look in the months after surgery. They gradually fade and become softer over time.

Sometimes people are unhappy because of how a scar looks, or if it feels tight and uncomfortable. This may cause concerns about your body. It could also affect relationships and how you feel about being physically intimate with another person.

Tell your doctor or nurse how you feel about the scar. There are usually different treatments that may help. You may have a combination of these. You can use skin camouflage make-up to help make a scar less noticeable (see page 41).

Your doctor may prescribe creams or gels to help a scar heal, make it feel softer or lighten its colour. If a scar is uncomfortable and stiff, physiotherapy may help to soften it and make it more comfortable. Steroid injections may be used to soften and flatten certain types of scar.

It may also be possible to have surgery to make a scar less noticeable. Doctors call this scar revision. A surgeon can do this under a general anaesthetic, or sometimes under a local anaesthetic. You may have to wait up to a year or sometimes longer after your first operation to have this done.

Prosthesis

If you wear any type of prosthesis (false body part) and do not feel confident, talk to your nurse or doctor. The prosthesis may not be the right fit, type or colour match for you. This could be because it was not correct to begin with or because it is now damaged. Or it could be that your body weight or shape has changed since it was fitted.

Even if your prosthesis is still in good condition, your nurse or doctor can arrange for you to be reassessed. If you have had the prosthesis for a while, there may be new, improved types available.

Breast Cancer Now has information about prostheses after a mastectomy (see page 70). If you have a facial prosthesis, Changing Faces has more information (see page 70).

Weight gain or weight loss

Some cancer treatments may cause you to gain or lose weight. This can be upsetting and cause body image concerns.

For example, steroids are often given with chemotherapy or hormonal therapy and can cause weight gain. But this will improve gradually after your treatment finishes. Ask your specialist nurse or dietitian for advice. It is not recommended that you try to lose weight on purpose during cancer treatment. After treatment, when you feel ready, you can look at ways of managing your weight by eating healthily and being more physically active.

Some people lose weight because of cancer symptoms, treatments, or their side effects. If you have lost weight, it is important to get advice from a dietitian. There are different ways to add calories to food. Nutritional drinks and powders can help build up your weight.

You might find our booklets **Managing weight gain after cancer treatment**, **Healthy eating and cancer** and **The building-up diet** helpful. You might also like to order **Recipes for people affected by cancer** (see page 66).

Managing late effects of treatment

Late effects of treatment, such as lymphoedema or bladder or bowel changes, often affect body image. There are usually things that can be done to improve and manage them so you feel more confident.

If you are having problems with lymphoedema, contact your lymphoedema specialist nurse or physiotherapist. If you do not have one, ask your doctor to refer you. You may need your support sleeve or stocking re-fitted. Or you might need new advice on managing lymphoedema.

If you have bladder or bowel late treatment effects, it is important to talk to your doctor or nurse. They can refer you to other healthcare professionals for advice and possible treatments.

We have more information in our booklets

Managing the late effects of bowel cancer treatment and **Understanding lymphoedema** (see page 66).

Make-up, clothing and accessories

There are several ways to cover up changes and to help you feel better about yourself. Different people can help you with this. This includes your healthcare team, who can:

- advise you about clothing and accessories, for example using a scarf to cover up hair loss
- make sure you have the most suitable and least visible product, for example a speaking valve after surgery to remove the voicebox (larynx)
- refer you to Changing Faces or the British Association of Skin Camouflage (see page 70) for advice about camouflage make-up
- refer you for a replacement part (prosthesis), for example a breast prosthesis.

Hair loss

If you choose to cover your head, there are lots of ways you can do it. You could use wigs, hats, turbans, scarves or bandanas. Some chemotherapy drugs make you lose all your body hair, eyelashes and eyebrows. Boots Macmillan Beauty Advisors can help you draw on eyebrows or use false eyelashes. Ask your chemotherapy nurse or doctor first if it is okay to wear false eyelashes. If your lashes are already thinner, you do not want to use something that might pull more out. Some people may be sensitive to the glue used.

Your hair will usually grow back over a few months after your treatment finishes. It will be very fine at first and may be a slightly different colour or texture than before. You will probably have a full head of hair after 3 to 6 months.

Facial hair is an important part of some people's identity. Or it may be important for cultural or religious reasons. Some online companies, make-up shops or theatrical shops sell moustaches or beards. Some of these can be made specially for you, but this can be very expensive.

We have more information in our booklet **Coping with hair loss** (see page 66).

Camouflage make-up

If you have had skin grafts (skin replaced with skin from another part of the body), the colour may not match your surrounding skin. Or you may have visible scars you would like to cover up. Using camouflage make-up can help.

Changing Faces has trained skin camouflage practitioners (see page 70). They can find the best colour match for your skin tone. They can also teach you how to apply the specialist waterproof cover creams and powders. You can get these on prescription. Changing Faces runs clinics across the UK.

If you wear a prosthesis and it does not match your camouflage make-up, go back and see the person who supplied it. They can match the colour to your camouflage make-up.

Managing skin and nail changes

Changes to your skin and nails depend on the cancer drug or treatment you are having. Your healthcare team may give you advice on looking after your skin. They may tell you about products you should use or avoid. It is very important to follow this. We have more detailed information about looking after your skin and nails in our booklet **Feel more like you** (see page 66).

Make-up and beauty treatments

Using make-up and having beauty treatments can be creative and may help you to feel better.



Boots Macmillan Beauty Advisors

These advisors are specially trained by Macmillan and Boots. They give you face-to-face advice about caring for your skin, nails and hair during treatment. They show you how to use products to:

- disguise skin changes
- draw on eyebrows
- emphasise certain features.

Visit [boots.com/storelocator](https://www.boots.com/storelocator) to find your nearest Boots Macmillan Beauty Advisor.

Look Good Feel Better (LGFB)

This charity has trained volunteer beauty professionals who run free workshops for people coping with cancer treatment (see page 71). Workshops are available in over 80 hospitals and specialist cancer centres across the UK. Ask your nurse or doctor for a referral or visit [lookgoodfeelbetter.co.uk](https://www.lookgoodfeelbetter.co.uk) to find one in your area.

LGFB have a programme specifically to support men. It includes workshops, an information manual and tutorials (see page 71).

Clothing

You can use clothes to feel comfortable and as a way of expressing yourself. If you choose to, you can also use clothing to cover up certain body changes.

Look at the clothes you already have to see what is suitable. Ask a family member or friend to help you.

Depending on the body change you have, you can get advice on clothing from support organisations, for example Breast Cancer Now, Changing Faces, the Colostomy Association the Ileostomy & Internal Pouch Support Group or the National Association of Laryngectomee Clubs (see pages 70 to 71). Online forums are also a good place to get advice.

Here are some tips that might help:

- If you have had surgery to the tummy area, have swollen legs or have put on weight, trousers with drawstring or elasticated waists or flat-front trousers are good.
- Long skirts, with or without slits, or wrap skirts can be a good alternative to trousers.
- If you have had a mastectomy and used to wear lower-cut dresses before, try wearing a vest or camisole top underneath.
- High V-neck shirts help if you want to cover a scar or central line in the chest area.
- High, mandarin-type collars or polo necks help cover up your neck area.

- Patterned shirts draw attention to the pattern and away from other areas.
- Bell-shaped sleeves are good if you have a swollen arm.
- Accessories help give different looks to one outfit. They also draw attention to certain areas and away from others.
- Avoid drawing attention to a change by hiding it. For example, instead of a high-necked jumper in summer, try a lightweight scarf.

If you need to buy new clothes because of body changes and cannot afford it, ask about a Macmillan Grant (see page 69). Call **0808 808 00 00** to find out more.

'I developed a new style of dressing which made me feel more in control. I also started wearing "statement" glasses to draw attention away from my lack of eyelashes or eyebrows.'

Penny



TAKING CONTROL

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Helping you take control

When you feel ready to start taking control of some situations, there are different approaches that may help.

These include:

- setting goals
- problem-solving
- challenging unhelpful thinking.

Setting goals

If you have body image concerns, you may avoid social activities or doing things you enjoy because of anxiety. Setting goals can help you overcome anxiety and help you do things that are important to you. Here are some ways to help you decide which goals to set and how to achieve them.

Each goal should be:

- personal – this means it important to you
- realistic – this means you feel ready or able to deal with it
- achievable – this means it is realistically possible
- measurable – this means you will know you have achieved it
- specific – this means you have thought about the details that will help you achieve it.

You can break your goal into short-, mid- and long-term goals. There is an example on pages 49 to 50.

Example

John was anxious about going out in public and had been avoiding his friends. His treatment had slightly affected his speech and he was worried about being misunderstood. But he wanted to go to a family wedding in 6 months' time. So he found short- and mid-term goals to help him work towards his long-term goal:

- short-term goal – go for a coffee with a friend
- mid-term goal – go for a meal with friends
- long-term goal – attend the wedding in 6 months' time.

To begin with, John focused on smaller steps to achieve his short-term goal. He repeated each step until his anxiety reduced and he felt comfortable enough to move to the next step:

Step 1

Phone a few friends to see if anyone is available to go for a coffee. Ask the friend to come to his house so they can walk to the coffee shop together. Go at 10am when the coffee shop is quiet.

Step 2

Walk to the coffee shop alone at 10am and meet a friend outside.

Step 3

Walk to the coffee shop alone at 10am and meet a friend inside.

Step 4

Walk to the coffee shop alone at a busy time and meet a friend inside.

Repeating each step let him gain confidence in managing his anxiety.

John went through a similar process with his mid-term goal. He gradually built his confidence by going out for a meal in smaller, quieter restaurants, then in more challenging, busier places. These steps made it easier for him to achieve his long-term goal of going to the wedding.

Problem-solving

Struggling and worrying about problems can make you feel more anxious. Dealing with them in a structured way helps make them more manageable.

You can do this through a series of steps:

Step 1

Identify the problem as specifically as possible and write it down.

Step 2

Think of possible solutions and write down ones that may help. Think about what has helped you solve problems before.

Step 3

Decide on possible solutions and their benefits and disadvantages to help you choose the best one. Choose one to begin with. You can always go back and try others later.

Step 4

Break the solution down into smaller steps to make it easier or more manageable.

Step 5

Try it out and follow the steps at your own pace. If it does not work well, try another of your solutions.

Dealing with one problem successfully can help you overcome bigger problems.

Here is an example of problem solving.

Example

David had problems swallowing, because of a dry mouth caused by radiotherapy. He was worried about not being able to eat out, which he had always enjoyed.

Instead of avoiding going out, he thought about different solutions. He decided to phone the restaurant to check the menu. He found there were things on the menu that he could eat. He also asked if he could have a smaller portion and extra sauce. They told him this would be okay. After that, he felt less anxious and more confident about going out with his family for a meal.

You may want to identify a problem and think of the solutions that can help you overcome it.

Problem:

Possible solutions:

Best solution:

Steps:

Review:



Challenging unhelpful thinking

Thoughts go through our minds all the time. They can be influenced by our past experiences. They can also be based on incorrect assumptions or inaccurate facts.

It is not unusual to have negative thoughts when you are coping with cancer and body changes. But if this becomes a usual way of thinking, it can affect your mood. It can make you feel less confident and more anxious. You may ignore positive things about yourself and believe all your negative thoughts are true. Becoming more aware of your thoughts and beliefs can help you see unhelpful patterns. You can then see the effect they have on your feelings and behaviour. This is the basis for cognitive behavioural therapy – CBT (see page 26).

Recognising unhelpful thoughts helps you challenge them and think in a more positive, balanced way. Try asking yourself the following questions:

- Is what I am thinking definitely right? What is the evidence for and against my thinking?
- Am I jumping to conclusions, seeing the negative, forgetting the positive or getting things out of proportion?
- How might someone else see this situation? What would I say to a friend in a similar situation?
- What would be the effect of thinking about things less negatively?
- What can I do to change my situation? Am I overlooking possible solutions to problems?

There are different unhelpful thinking patterns. We have included some examples of these and how you can change them into more balanced, positive thoughts.

Over-generalising

When something has gone wrong in our lives, we may see it as a sign that everything will now go wrong.

Negative thought

'Everyone will stare at me if I go to the pub.'

Balanced, positive thinking

'Some people will stare, probably out of curiosity. But I will have my friends with me for support.'

Taking things personally

When we feel anxious or low, it is easy to make assumptions. For example, you may think everything is related to your appearance or body change.

Negative thought

'I didn't get the job because of my appearance.'

Balanced, positive thinking

'I didn't get the job because there was someone better suited to it.'

Mental filtering

This is when we focus on the negative and ignore the positive.

Negative thought

'The woman in the shop didn't understand me as my speech is so poor now.'

Balanced, positive thinking

'Although the woman didn't understand me the first time, she did when I repeated it. So I can make myself understood.'

Jumping to conclusions or mind-reading

This is when we think we know what someone else is thinking, without checking that we are right.

Negative thought

'My partner will think I'm unattractive because of the changes in my body.'

Balanced, positive thinking

'I have other attractive qualities that my partner loves about me.'

Black and white thinking

This is when we think in extremes of all or nothing, with no grey area in between.

Negative thought

'If I can't eat a full meal, there is no point in going to a restaurant with my family.'

Balanced, positive thinking

'It would be nice to go out with my family and I can ask for a small portion of food.'



Developing a positive body image

You will need time to recover from treatment and to adapt to body changes, especially if they are more permanent. Taking care of yourself and your body is important. It may help you develop a more positive body image. Even if your body looks or feels different, you can feel proud about it getting you through treatment. You may find that you appreciate what it does for you every day.

Take time regularly to do nice things for yourself, so your body knows you appreciate it. This could just be having a relaxing bath, going for a massage, or spending time somewhere you find peaceful.

The suggestions below may help your confidence:

- Be kind to yourself.
- Spend time with people who support and encourage you.
- Write down what you like about yourself.
- When you see yourself in your mind, or in a mirror, look at yourself as a whole person. Don't focus on parts of your body you don't like.
- Write down the ways in which you appreciate your body. Think about what it allows you to do every day and what it has done for you over your life.

Artistic tattoos

After surgery that has changed their appearance, some people choose to get an artistic tattoo. For example, this could be after breast surgery such as a mastectomy or other types of surgery. It may be to cover a scar or to do something special that honours what their body has been through. It may make them feel more confident and as if they are reclaiming their bodies.

It is important to talk to your cancer doctor or specialist nurse first. You need to know if there are concerns about the skin in the area. Your operation sites need to be completely healed. This may take up to a year, but it can be longer. You should have also finished any chemotherapy or radiotherapy treatment.

Breast Cancer Now have more information about artistic tattoos after breast surgery (see page 70).

Making healthy choices

Eating healthily, getting enough sleep and being more physically active are ways of taking care of your body.

Giving up smoking and not drinking more than recommended levels are also important. These are positive ways of looking after your body. They may help you feel more in control and improve your body image.

You might find our booklets **Healthy eating and cancer** and **Physical activity and cancer** helpful (see page 66).



Life is short go where the wind takes you and don't forget your hopes

Survivor

Be more active

Doing regular physical activity can help you feel better about your body, its strength and what it is capable of doing. It makes you feel less tired and helps release chemicals (endorphins) that lift your mood and lower the levels of stress hormones.

It can be a chance to start doing a new type of activity you might not have thought of before. There are lots of different activities you can get involved with. Short walks that you build up slowly can often be a good start.

Some areas run physical activity programmes for people with cancer. Ask your healthcare team or look online for advice and to find out what is available in your area. Regular physical activity also helps keep your heart and bones healthy. It may help reduce the risk of certain cancers coming back.

Eat a balanced diet

A healthy, balanced diet gives you more energy. It also makes you feel better. Drink plenty of water, which helps look after your kidneys.

Try to eat:

- plenty of fruit and vegetables
- less saturated fat and sugar (including cakes, pastries, and fried foods)
- less red and processed meat.

A balanced diet reduces the risk of other diseases, such as diabetes and heart disease.

Sleep well

We all feel better after a good night's sleep. Cancer treatment can make you tired for weeks or sometimes even months after it has finished. Feeling anxious can also stop you sleeping. If you are having problems sleeping, ask your doctor or nurse for advice.

Stop smoking and stick to sensible drinking

If you smoke, stopping smoking is the best decision you can make for your health. Smoking is a major risk factor for smoking-related cancers and heart disease.

Stay within the recommended guidelines for alcohol. Drinking too much can make you more anxious or depressed. It affects your health and how you look. It also stops you sleeping well.

NHS guidelines suggest that both men and women should:

- not regularly drink more than 14 units of alcohol in a week
- spread the alcohol units they drink in a week over 3 or more days
- try to have several alcohol-free days every week.

A unit of alcohol is half a pint of ordinary strength beer, lager or cider, one small glass (125ml) of wine, or a single measure (25ml) of spirits.

There is more information about alcohol and drinking guidelines at drinkaware.co.uk

If your doctor has advised you to stop drinking, it is important to follow this advice. It can be hard to stop smoking or cut down on alcohol when you are feeling anxious and stressed. Ask your doctor or nurse for advice. There is lots of different support to help you.



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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 booklets or leaflets like this one. Visit [be.macmillan.org.uk](https://www.be.macmillan.org.uk) or call us on **0808 808 00 00**.

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

Online information

All our information is also available online at [macmillan.org.uk/information-and-support](https://www.macmillan.org.uk/information-and-support) You can also find videos featuring 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](https://www.macmillan.org.uk/otherformats)

If you would 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**.

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](https://www.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](https://www.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.

'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

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**

Work support

Our dedicated team of work support advisers can help you understand your rights at work. Call us on **0808 808 00 00** to speak to a work support adviser (Monday to Friday, 8am to 6pm).

Macmillan Organiser

This includes a records book to write down information such as appointments, medications and contact details. 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.

Body image and cancer support organisations

Breast Cancer Now

Helpline 0808 800 6000

Email

info@breastcancernow.org.uk

www.breastcancernow.org.uk

Provides information and support for anyone affected by breast cancer. Specialist breast care nurses run the helpline.

British Association of Skin Camouflage

Tel 0125 470 3107

www.skin-camouflage.net

Members are trained by the association in all aspects of skin camouflage. Services are sometimes available through NHS clinics and creams can be prescribed by GPs.

Changing Faces

Helpline 0300 012 0275

(Mon to Fri, 10am to 4pm)

Email

info@changingfaces.org.uk

www.changingfaces.org.uk

Offers support and information for adults and children with a visible difference: a mark, scar or condition that makes them look different. Can arrange consultations with skin camouflage specialists, who can teach people to self-apply specialist cover creams.

Colostomy Association

Helpline 0800 328 4257

Email info@colostomyassociation.org.uk

www.colostomyassociation.org.uk

Offers a helpline answered by trained volunteers. They provide support and information and free leaflets. Support groups throughout the UK where you can meet fellow ostomates.

IA (Ileostomy and Internal Pouch Support Group)

Tel 0800 018 4724

Email info@iasupport.org

www.iasupport.org

Provides support and information for people who have an ileostomy or internal pouch.

Look Good Feel Better (LGFB)

Tel 0137 274 7500

Email info@lgfb.co.uk

www.lookgoodfeelbetter.co.uk

A free cancer support service for people undergoing treatment for any type of cancer. Free skincare and make-up workshops across UK to help you manage the visible side effects treatment and boost confidence and well-being. Holds workshops for men and have a specific booklet that covers issues for men.

Look Good Feel Better For Men

www.lookgoodfeelbetterformen.org

Has tips to help men deal with the side effects of cancer treatments on hair, skin, body and mind.

The National Association of Laryngectomy Clubs

Tel 0207 730 8585

Email

info@laryngectomy.org.uk

www.laryngectomy.org.uk

Offers support and information to people who have had a laryngectomy – and their families and friends. Has 80 clubs throughout UK.

Saving Faces

Helpline 0208 223 8049

Email info@savingfaces.co.uk

www.savingfaces.co.uk

Links new patients with former patients who can provide advice and support. Gives information about facial surgery research. Provides information about cancer, benefits advice, and emotional or psychological support.

Emotional support

Anxiety UK

Infoline 0344 477 5774

(Mon to Fri, 9.30am to 5.30pm)

Text 0753 741 6905

Email

support@anxietyuk.org.uk

www.anxietyuk.org.uk

Has resources to help people understand and overcome anxiety. Members can access discounted therapy services.

Samaritans

Helpline 116 123

Email jo@samaritans.org

www.samaritans.org

Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

LGBT-specific support

LGBT Foundation

Tel 0345 330 3030

(Mon to Fri, 10am to 6pm)

Email helpline@lgbt.foundation

www.lgbt.foundation

Provides a range of services to the LGBT community, including a helpline, email advice and counselling. The website has information on various topics including sexual health, relationships, mental health, community groups and events.

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 our Senior Medical Editor, Prof Tim Iveson, Macmillan Consultant Medical Oncologist.

With thanks to: Morven Angus, Macmillan Survivorship Lead; Dr Christopher Hewitt, Consultant Clinical Psychologist; Sharon Hulley, Macmillan Skin Cancer Clinical Nurse; Jenny King, Chemotherapy Nurse Specialist, Dr Helena Lewis-Smith, Research Fellow – Centre for Appearance Research; Caroline Rennie, Macmillan Nurse Consultant; and Helen Sanderson, **Thinkaboutyourlife.org**

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 the booklet below. If you would like more information about the sources we use, please contact us at **cancerinformationteam@macmillan.org.uk**

Carr. The impact of cancer and its therapies on body image and sexuality. Psychological Aspects of Cancer. Springer. 2013.

Esser et al. Body image mediates the effect of cancer-related stigmatization on depression: A new target for intervention. Psycho-Oncology. 27. 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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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 about how cancer and its treatment may affect your body image. It is for anyone who is worried about changes to their body caused by cancer or cancer treatment.

There are suggestions on how to manage certain changes to your body and on coping with some of the feelings you may have.

At Macmillan, we give people with cancer everything we've got. If you are diagnosed, your worries are our worries. We will help you live life as fully as you can.

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.

Trusted
Information
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Patient Information Forum