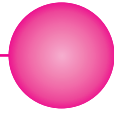




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hormonal therapy



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Long-term protection from breast cancer

What you can do now to stop your breast cancer returning

You'll find this information useful if you are taking hormonal therapy, or are considering doing so.

Although there's a good chance that the surgery and subsequent treatments have removed the cancer, there is a chance that the cancer will come back over the next few years. The risk of the cancer returning does not run at a constant level and the risk that it will return is greatest over the first 2-3 years after surgery although there remains some risk later. This is why it is recommended that if hormonal treatment is appropriate for you, that it's given for 5 years and it's important that you keep on with the treatment for the full period.

Many women who are advised that they should consider adjuvant hormonal therapy see it as an insurance policy. And it is considered by many medical professionals as the most important step you can take to stop your breast cancer from returning.

The treatment usually comes in the form of a pill, to be taken every day for anything up to five years. And as such it will need to be built into the routine of your day so that you don't forget it.

If you're now on hormonal therapy you're probably seeing a lot less of your breast cancer care team. But that doesn't mean that you can't get the help, advice and support you need to help you through this important stage of your treatment.

Being proactive about your recovery feels good. Making appointments, asking questions and finding out more about things that make you feel better physically and emotionally all contribute to that vital 'back in control' feeling.

And this includes making sure you thoroughly understand the reasons for taking your hormonal therapy, which we will cover in this booklet.



Proud and positive


You have every right to feel proud of yourself when you consider the challenges you have faced recently.

You may be surprised, however, to discover that lots of negative feelings are still cropping up. Everyone's different of course, but many people find they have a sort of 'crisis management' mentality which allows them to cope with difficult situations. Eventually, once the crisis is over, negative emotions will leak out when, on some level, you feel that it is safe for them to do so.

If you hit yourself on the thumb with a hammer and say 'ouch', you and everyone else understands what has happened. If you hit yourself on the thumb and suddenly say 'ouch' six months later, this can be a bit surprising.

Some of the emotions you are feeling now probably stem from several months ago. Because they have been delayed it can be disconcerting for you and the people around you because they seem to be out of context.

Actually the fact that these emotions are now surfacing is a positive sign, and very much part of the overall healing process. So if you suddenly feel like having a cry, then do!



Starting your hormonal therapy



Taking your hormonal therapy is the single most important thing you can do to prevent your breast cancer returning.

Some tumour cells are stimulated by the oestrogen produced naturally in our bodies. Your hormonal therapy works by depriving any potential cancer cells of the oestrogen they would need to return.

That's why the key to getting the best protection from your hormonal treatment is to take your medication every day. Imagine you are building a wall to stop cancer returning. If you keep the wall unbroken day after day, then it is very difficult for the cancer to return.

Building your pill into your daily routine is the answer. Taking your pill at the same time every day helps, like in the morning before or when you have breakfast, when you first switch on the radio or TV or last thing at night. You could try leaving your pills next to the kettle so that you take it with your first cup of tea in the morning. You can also buy pill dispensers which help you to ensure you are taking the right pills every day.

You will have to plan ahead for holidays, and remember to take enough pills with you to keep you going while you are away.

If you miss a tablet, don't worry. Take it as soon as you remember. But if you are busy and often forget it, you might consider setting an alarm on a clock or your mobile phone to remind yourself.

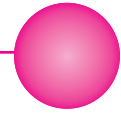
If you're planning to go away on holiday, make sure you have enough pills to cover the length of your trip. If you're not sure, arrange a repeat prescription.

Making sure it's the right therapy for you

It's important to talk to your doctor about the hormonal therapy you're taking. And let him or her know if you are experiencing any problems with it. There's now more than one kind of hormonal therapy available, so there are alternatives if you find that the particular pills you are taking don't agree with you. Some of the newer hormonal therapies have proven to be more effective for some people. Your doctor and breast care nurse will be able to give you information on the pros and cons of each type.



Managing side effects



About side effects

You may experience some temporary side effects with hormonal therapy. The good news is that there are practical things you can do to stop them interfering with getting on with your life.

This is where the experiences of other women can come in really useful too. Some side effects are commonly experienced and you might find that talking to other women, or going online could prove very helpful.

What side effects might I experience?

If you have already gone through the menopause, you might find that the side effects of your hormonal treatment are similar to those which you have already experienced. Here are some tips on how to manage some side effects which could include the following:

- **Hot flushes**

Avoid spicy foods, dress in layers so that you can take clothes off and put them on to easily regulate your temperature, drink something cold if you feel a flush starting, sleep in a cool room and talk to your doctor about other possible medical remedies.

- **A loss of libido**

If you have a partner, it is very helpful to explain that a loss of libido is not about you not loving them any more. Patience is important for both of you in these circumstances. Your sex life is not all over, but it is usual to have an interruption. Studies have shown that exercise is a tremendously effective way of kick starting a jaded libido. Many women who have been through breast cancer treatment report that it takes them about a year after their treatment for their libido to reach a level similar to the one they had before their treatment. Time is a healer.

- **Vaginal dryness**

If you are experiencing this, try using a vaginal moisturiser a few times a week. If you have a partner and are worried about this affecting your sex life, you might find that using a lubricant will help. Do not use any preparations that contain oestrogen, without first consulting your doctor, as these may undo the benefit from the hormonal therapy you are taking.

- **Joint pain**

Apply some heat to the area that's sore, or try ibuprofen or a similar anti-inflammatory drug. Remaining active is helpful, and getting out and about and walking at least half an hour every day can have excellent overall health benefits, and help to reduce the amount of joint pain you experience.

- **Sleep problems**

If you can manage it, try having a nap during the day. Exercise in the mornings rather than the evenings and cut down your caffeine intake. If you find that unpleasant thoughts are keeping you awake at night, you might consider talking to a counsellor to help you overcome this.

What else can I do to avoid side effects?

- Internet chat rooms for breast cancer survivors are well worth investigating, as they contain tips on what women have found to be of practical benefit.
- Stick to the recommended alcohol limit of 14 units a week.
- Make sure you're getting enough vitamin D by eating dairy products, fortified breakfast cereals, certain oily fish and green vegetables. Vitamin D production in the body is stimulated by sunlight. Although exposure is controversial because of the risk of skin cancer, most medical professionals agree that 15 minutes of exposure, a few times a week can greatly help your vitamin D levels.
- You might have heard about some women developing osteoporosis or weakened bones as a result of their hormonal therapy. If you're at all worried about this, it might be worth asking to have your bone density assessed before you start your treatment. To reduce the risk of osteoporosis, try taking regular weight-bearing exercise for a minimum of 20 mins three times a week, eat a calcium-rich diet. Calcium is found in dairy products – as well as oily fish like sardines or salmon, nuts, seeds, and green and leafy vegetables. Your doctor may recommend that you take a calcium & vitamin D supplement to improve your bone health.
- Take some exercise – little and often is best.
- Complementary therapies such as Reiki, acupuncture and massage may help you to relax properly. Techniques like this help you to manage your stress levels and this helps to promote better health generally. So if you're already having any of these types of therapy, it may be well worth continuing with them.

And of course talking will help too. It won't help you avoid side effects, but can certainly make them a little easier to live with. Try to share your experience with someone close to you, or a counsellor.

That way they can be more understanding, make life a little easier for you and not expect so much of you when you're not feeling your best.



Make a note of the side effects that you're feeling then discuss them with your doctor. If nothing else, it will help put your mind at rest.

“One of the things I soon learned was that not every ache or pain was caused by my cancer.”

Rachel, 59

That's just the start. There are so many other things you can do to help you relax. Why not think about learning a new skill or, if you have the time, get involved in events which are organised by people who support breast cancer patients? Or you could volunteer to work in your local charity shop. It's nice to think that you will be helping other people who have had the same experience as you.

When people really want to feel that you're making progress, it can be hard for them to accept that you may still have tough times. The more you can involve them in what you're doing, the easier they will find it to give you the help and support you need.

Healthy eating helps



Your diet will play an important part in helping you feel well. Following a few simple dietary steps can really make a difference.

- Eat at least 5 portions of fresh fruit and vegetables every day
- Base your meals on starchy foods like wholemeal bread and wholegrain cereals
- Eat more fish, and include two portions of oily fish each week
- Cut down on saturated fats (you'll often find these in sausages and processed meats, so check food labels before you buy)
- Reduce your sugar and salt intake
- Drink 6-8 glasses of water a day
- Eat regular meals – and don't skip breakfast!

Why exercise is important

As well as helping you recover from surgery, regular exercise can have so many other benefits. Research has shown that even 3-4 hours of exercise a week can improve your overall chances of surviving breast cancer. There's no need to do anything too strenuous immediately: just a gentle walk or swim will help.

The golden rule is 'little and often'. Don't overdo things, and always seek the advice of your doctor if you're not sure about how much exercise you should be taking.

Your pills might not actually make you feel any better but...

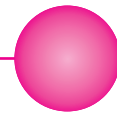
The odd thing about hormonal therapy is that it probably won't actually make you feel any better from one day to the next. But over a 5-year period it will significantly decrease the likelihood of your breast cancer coming back.

So although you may not notice any benefit from your therapy and possibly experience some side effects, stopping it without talking to your oncologist and doctor could put your long-term health at risk.

For some women side effects can subside over time. Talk to your doctor about any concerns you have about side effects.



Enjoying life again



Thankfully, you may well be finding your life beginning to settle back into a more normal routine. You have been through a great deal, and of course this will have changed your life, but now you may well feel much more in control again.

It is surprising, but many people find that an encounter with breast cancer actually changes their lives for the better in the long term. When life is trundling along normally it is very easy to lose sight of what is really important.

Going through the experiences you have gone through could well make you value things you may have taken for granted. Something as simple as being able to enjoy sitting in a garden and looking at flowers can seem a real delight.

And of course it's time to appreciate the people in your life. It is always surprising who ends up coming up trumps for you when life gets challenging.

You might find that you have more of a 'seize the day' attitude. For example, if you have always promised yourself a holiday somewhere special and have never got around to it – why not start planning today to actually take it? There's no time like the present!

If you look on the Internet, you'll find some helpful information on thanking and involving the people you love in what you're going through.

Keep talking to your doctor

- Over half of the women who have had breast cancer treatment and feel tired never mention the problem to their doctor. They assume incorrectly that it's something that their doctor can't help them with. The best thing to do is to write down how it's affecting you and make an appointment with your doctor or the breast cancer nurse to explain how you feel. You may be pleasantly surprised at the number of help options which are available to you.
- If you are feeling fatigued, or experiencing disrupted sleep patterns, difficulty concentrating, feeling anxious, emotional or irritable then you may be experiencing depression. The best person to talk to about depression is your doctor. It's only by discussing everything properly with you that your doctor will be able to recommend the right course of action for you.

Glossary



ADJUVANT THERAPY

Adjuvant therapy is a treatment method used in addition to the primary therapy to improve the chances of curing cancer. It is often given when it is not known for certain whether or not any cancer cells may still remain in the body. Examples of adjuvant therapy in breast cancer include the use of hormone blocking therapy or chemotherapy after surgery.

ANTI-OESTROGEN

An anti-oestrogen (like tamoxifen) is a drug which reduces the production of oestrogen or changes the normal action of oestrogen in the body. This is important for post-menopausal women with hormone-sensitive tumours, since the presence of oestrogen can stimulate the tumour cells.

AROMATASE INHIBITORS

Aromatase inhibitors (like anastrozole [Arimidex®], letrozole [Femara®], and exemestane [Aromasin®]) work by blocking peripheral oestrogen production. This is important for post-menopausal women with hormone-sensitive tumours, since the presence of oestrogen can stimulate the tumour cells.

BREAST CANCER RECONSTRUCTION

The use of plastic surgery to rebuild the breast following surgery.

CANCER

Cancer is a general term for more than 200 diseases. It is the uncontrolled, abnormal growth of cells that can invade and destroy healthy tissues. Most cancers can also spread to other parts of the body.

CELL

A cell is the basic structure of living tissues. All plants and animals are made up of one or more cells. An amoeba for example, is made up of one cell.

CHEMOTHERAPY

The use of cytotoxic drugs to treat cancer.

CLINICAL TRIALS

Research trials to test new treatments or approaches to detecting, reducing the risk for and managing cancer, which may prove to be of more benefit than current methods. Strict rules are followed to make sure participants are well informed about the purpose, risks and benefits of any study before they agree to join a clinical trial. Participating in a clinical trial does not affect the quality of the care you will receive.

COMBINATION THERAPY

The use of two or more types of treatment for a particular type of cancer (e.g. surgery and radiation therapy).

CYTOTOXIC DRUG

A drug that damages or destroys rapidly dividing cancer cells. These types of drugs can also affect

normal rapidly dividing cells in the body (e.g. bone marrow, skin and stomach lining) and therefore, can be associated with unpleasant side effects.

HORMONE REPLACEMENT THERAPY (HRT)

The use of synthetic oestrogen and/or progesterone after menopause to replace the natural hormones produced by women in their fertile years.

HORMONAL THERAPY

This therapy, given when tumours are hormone-sensitive i.e. when the continued growth of the tumour is dependent on the female hormones oestrogen and progesterone, is usually started after radiotherapy and chemotherapy (if you have it) have finished. There are different drugs, usually a pill taken every day for around 5 years. Taking the full treatment is clinically proven to reduce the risk of cancer returning.

HORMONES

Chemical substances that regulate such specific body functions as metabolism, growth, and reproduction.

LYMPH NODES

Small bean-shaped glands that filter impurities picked up by lymphatic fluid. Large collections of lymph glands, or nodes, are most commonly found in the armpits, groin and neck.

MALIGNANT

The term malignant means cancerous.

MAMMOGRAPHY

Mammography uses small amounts of x-rays to get a clear picture of the soft tissue inside the breast. This x-ray picture is called a mammogram.

NEOADJUVANT THERAPY

This is a treatment given before surgery in order to shrink the tumour. This makes the tumour easier to remove and in some cases can allow breast-conserving surgery rather than a total mastectomy. Depending on the type of tumour it can consist of either chemotherapy or hormonal therapy.

OESTROGEN

A female hormone mostly produced by the ovaries. It influences such female sexual characteristics as breast development, and it is necessary for reproduction. A small amount is produced by the adrenal glands, and other tissues such as fat and the liver. The growth of many breast cancers is stimulated by the presence of oestrogen.

ONCOLOGIST

An oncologist is a doctor who is a specialist in the understanding and treatment of cancer. There are a number of different types: gynaecological (cancers of the ovaries, uterus and vagina), medical (drug therapy), paediatric (childhood cancers), radiation and surgical.

OSTEOPOROSIS

A process in which bone loss occurs more quickly than bone redevelopment, making the bones very thin and weak, and at risk of fractures.

RADIOTHERAPY

The use of high-energy penetrating rays to treat disease. Radiotherapy can be internal or external.

RADIOLOGIST

A radiologist is a physician with special training in reading and interpreting diagnostic x-rays and other imaging techniques such as ultrasound and CT scans. Breast cancer patients will also find that the radiologist is responsible for using radiation to treat disease.

SIDE EFFECT

An unwanted or undesirable symptom caused by cancer treatment.

TUMOUR

A tumour is a lump, mass or swelling of tissue. A tumour can be benign (not cancerous) or malignant (cancerous).

X-RAYS

Short wavelength radiation derived from a high-energy radiation source. X-rays produce images of body organs on film for diagnostic purposes. High energy x-rays are used to treat some forms of cancer. X-rays are a form of 'ionizing radiation'.





touchpoint

Guiding, advising and supporting women with breast cancer