

# BODY IMAGE AND CANCER





**'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 – had concerns about body image after breast cancer in 2014**

# About this booklet

This booklet explains how cancer and its treatments 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.

We hope this booklet answers some of your questions about body image and helps you find ways of coping with any concerns.

Throughout the booklet we suggest ways of dealing with some of the different feelings and thoughts you may have. We also discuss ways of managing other people's reactions to changes to your body. We give practical advice and suggestions on how to improve your body image. We also explain how to get help and support.

To help you find the information you need, we have divided this booklet into sections. Not all the information will be relevant to you, so you may just want to read certain sections. You can use the contents on page 3 to help you.

In this booklet, we've included comments from people who have had body image concerns. We hope you find them helpful. They are from members of our online community ([macmillan.org.uk/community](https://macmillan.org.uk/community)) and from the website [healthtalk.org](https://healthtalk.org) Some names have been changed.

Some quotes are from Penny who is on the cover of this booklet. She has chosen to share her story with us.

If you would like to discuss this information, call the Macmillan Support Line free on **0808 808 00 00**, Monday–Friday, 9am–8pm. If you are hard of hearing, you can use textphone **0808 808 0121**, or Text Relay. For non-English speakers, interpreters are available. Alternatively, visit **macmillan.org.uk**

On pages 72–76, you'll find contact details of some other organisations that may be able to help you.

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.

# Contents

Body image and cancer

5

Managing changes

17

Taking control

47

Further information

65





# BODY IMAGE AND CANCER

---

Body image	6
Cancer and body changes	7
How concerns about body image may affect you	10

# Body image

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

Our body image is important. It's linked to our feelings of self-worth and how we think others value us.

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. Women and men at any age can have body image concerns.

Changes to your body may be temporary or permanent. They include changes that can be seen by you or others, such as hair loss or weight gain. They also include changes that are more private.

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

There are lots of 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. These can affect how you see or feel about your body (body image). Body changes can affect:

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

They can happen quickly or gradually and may be temporary or permanent.

Some changes can be seen by others. They are visible (see page 8). Others may be hidden, except from you. There are also changes that can't be seen but can still affect your body image (see page 9), for example infertility. These can make you feel vulnerable and self-conscious about your body.

You may be coping with more than one body change. Remember that body image concerns are common and there are different ways to get help and support.

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

**Penny**

## Possible body changes

We haven't listed all the possible body changes here. There are too many to mention, but below are some common visible changes:

- **Hair loss.** This means losing hair from your head. It can also include eyebrows, eyelashes and body hair. This is usually a side effect of chemotherapy. Radiotherapy to the head also causes hair loss.
- **Scarring.** This could be 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's been removed.
- **Changes in how your body works after certain types of surgery.** For example, you may have changes after surgery to remove part of the bowel, or to remove the bladder or voicebox (larynx). This can include having a colostomy, an ileostomy, a urostomy or a tracheostomy.
- **Losing weight or putting on weight.** Putting on weight is often caused by steroids.
- **Skin changes.** Rashes, dry skin, spots or redness may 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.** This could be of an arm or leg, or other parts of the body (called lymphoedema).
- **Changes in the way you speak, eat or breathe.**
- **Changes in your movement, balance or coordination.**

Body changes that are not visible include the following:

- Infertility (being unable to get pregnant or father a child) or early menopause.
- Reduced sex drive, or being unable to have sex.
- Feeling tired and weak or unable to do certain things, such as sports or activities you did before treatment.
- Late treatment effects that change the way your bladder or bowel work.
- Changes in sensation. For example, you may have numbness in parts of your body after surgery, or in your hands and feet after chemotherapy (called peripheral neuropathy).



We have more information about these treatment effects. Call our cancer support specialists on **0808 808 00 00** or visit our website at **macmillan.org.uk**

# How concerns about body image may affect you

Body changes may cause you to have concerns about your body image. This may start before or during your treatment, or you may not think about it until later.

Everyone's reactions are different. Some people may feel more self-conscious about their body but find it manageable. Or you may find your concerns are on your mind a lot of the time and find this upsetting.

Body image concerns may make you feel:

- less confident
- anxious about people's reactions to you
- worried about going out and meeting people
- as if you've lost a part of yourself or aren't 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're coping with cancer and body changes. You may feel as if you are grieving for what you have lost.

Talking openly with people you trust can be the best way forward. This could be your family or close friends, or your cancer doctor or nurse. Talking to another person who has been through something similar can also help. There are different things that can help you manage your feelings (see pages 18–25).

But you may also find you come to value how your body has coped. Some people see their body changes as signs of their survivorship. It can also be good to know that people appreciate you for who you are, not for your appearance.

‘I went through a lot of mixed feelings. Obviously I was happy to still be here and I knew I should be grateful for that. But you do struggle with how you look and putting on weight. You have to find ways to live well and be fit.’

**Tracy**

## Getting used to the changes

Try to allow yourself time to get used to your body changes and be kind to yourself.

Before treatment, your doctor and specialist nurse will explain what to expect. This can help you feel more prepared and less anxious. Finding out about the cancer and its treatment helps you understand it better. It also helps you learn about managing the side effects of treatment.

If you have a body change you need to manage, for example a stoma, your specialist nurse will show you how to do this. Different support organisations (see pages 72–76) can usually put you in touch with someone who has been through a similar experience. Or you could look for support online (see page 70).

If you have a visible body change, such as a scar or stoma, try not to put off looking at it or dealing with it. You can do this with someone close to you, or with your nurse or doctor, or on your own. Delaying it often makes it more difficult to accept the change.

At first, you may feel shocked and upset, but these feelings usually lessen as you begin to get used to the change. You could look at the area covered up, then uncovered, and gradually build up to touching the area. Some people find it helpful to use a mirror when they start to look at the change in their body.

If you find it isn't getting easier, always ask your nurse or doctor for help.

## Anxiety

It's common to feel anxious when you're concerned about your body image. For example, you may worry about people's reaction to how you look, or the effect it has on your relationships. Although everyone feels anxious sometimes, it becomes a problem when it interferes with your day-to-day life.

When we're feeling threatened, our bodies release the hormone adrenaline. This causes the physical symptoms we get with acute anxiety:

- 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

It's common to try to avoid situations or things that make us anxious. This may be a relief at the time, but it can make things more difficult in the future. It doesn't give you the chance to find out if facing your fear is as bad as you think. It also keeps anxiety and fears going.

Avoidance may result in:

- avoiding looking at or dealing with a body change
- not going out, not looking in a mirror or not shopping for clothes
- delaying or not making a decision about treatment because it involves a body change.

There are different ways to help you to cope with anxiety (see pages 18–25). You can do some of these 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'd imagined.

'The thing that upset me was how 'cancerous' I looked. With the chemo and the scar and no hair, you just look so ill. That was what I really didn't like. I didn't like how I looked and I didn't like people looking at me, so I would stay at home. Sometimes I found it hard to go out. It takes away your confidence.'

**Rose**

## Depression

It's natural to feel sad and low at times when you're coping with 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.

Some symptoms of depression 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
- poor appetite or weight loss.

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

Occasionally, people may feel very low and need to talk to someone when they can't contact their doctor, nurse or counsellor. Samaritans has a 24-hour confidential helpline that provides support to anyone in emotional crisis (see page 76).



# MANAGING CHANGES

---

Managing anxiety and other feelings	18
What can help – practical advice	26
Relationships, sex and intimacy	38
Managing other people's reactions	40

# Managing anxiety and other feelings

## Talking to other people

Anxiety is common when you are dealing with body changes. Try to talk to people you trust and who will listen to you share how you feel. This may be family or friends, or your doctor, nurse or other health professional.

Putting your concerns into words can help you make more sense of your situation and put things in perspective. You may feel less anxious and more in control.

If people don't allow you to talk but try to reassure you too much, or tell you not to worry, it can be unhelpful or make you more anxious. Try to explain to them that what you need is someone who will just listen.

Health professionals can give you information and practical advice (see page 26). They can help you look at ways to reduce your anxiety. Tell them if your anxiety is difficult to manage or gets worse. They can refer you to a counsellor or psychologist, and prescribe medicines to help.

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 (see page 70).



You may find our booklet **Talking about cancer** helpful. You can order this from [be.macmillan.org.uk](http://be.macmillan.org.uk) or call our support line on **0808 808 00 00**.

'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**

## Problem solving

It can be useful to think ahead of ways to solve a problem (see page 51) or to handle difficult situations. For example, preparing an answer for awkward questions such as, 'What happened to you?' can help (see page 41).

Setting yourself step-by-step goals (see pages 48–50) can help you achieve simple things, such as meeting up with a friend. This means you're taking control of your situation.

## Writing things down

It can also 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 next page. There's space for you to think about the next steps you could take to help you manage your concerns.

## Support organisations

There are different resources that give advice on managing anxiety. The NHS has information on stress and anxiety, and there is information on Anxiety UK's website (see page 75). They also have DVDs, CDs and podcasts to help guide you at home.



Hopes

---



Fears

---

**Next steps:**



## Facing your fears

It's common to avoid situations that make you feel anxious. But here's an example of how facing fears can reduce them and help you feel more confident.

Anita's hair was growing back after treatment. She planned to meet a friend for lunch, but she was 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 didn't know the hotel was holding a big event that day, and that people she knew would be there. When she discovered this, her first reaction was to leave straight away. But she didn't want to let her friend down, so she carried on waiting anxiously. Her anxiety quickly passed as people she knew came up to her and were clearly happy to see her. They didn't seem to notice her hair and people she didn't know just carried on as usual.

## 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 aren't anxious.

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

**Step 1** – Your shoulders, head and neck should be relaxed, and supported if you're 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 stomach 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 five minutes, three times a day, for a few weeks.



## Other things you can do

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

- Practise exercises that involve learning to relax your breathing or your body (see page 22). Ask your GP about these – they may be able to refer you to a healthcare professional who can show you these techniques.
- Cut down on the amount of caffeine and alcohol you drink.
- Do regular physical activity. Activities like yoga can reduce stress.
- Get enough sleep. Get advice from your GP if you have difficulty sleeping.
- Using imagery (visualisation) to have a picture in your mind of a place and time you felt relaxed and happy. Concentrating on how you felt at that time may help you feel less anxious.
- Some people use meditation or mindfulness to help calm their mind and help them focus.
- Some people use complementary therapies to help them relax, such as massage, aromatherapy, reflexology or acupuncture.



You may find our booklet **Cancer and complementary therapies** helpful. To order a free copy visit [be.macmillan.org.uk](https://be.macmillan.org.uk) or call our support line on 0808 808 00 00.

## When you may need help

If your body image concerns are difficult to cope with, talk to your doctor or nurse. Let them know if you feel anxious or upset a lot of the time, or think you may be depressed. These are all normal reactions, but if they don't improve or are overwhelming, it's important to get help.

You may need help if you:

- find it hard to look at yourself after treatment
- avoid socialising because of body changes
- feel very unhappy with your appearance or spend a lot of time on 'fixing' your appearance
- have difficulties in your relationship with your partner.

Your doctor can refer you to a counsellor or psychological therapist. They usually refer you for a type of talking therapy that 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 is helpful for people with body image concerns. The aim is to help you change your thinking so you can cope more positively when you feel anxious, helpless or depressed. A psychologist will talk to you about the number of sessions you need and set goals with you. CBT and other forms of therapy are available on the NHS.

# What can help – practical advice

This information is about ways to help you feel better about your appearance, manage your body change and improve your confidence. You need to talk to your specialist doctor or 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 for your treatment and how it is likely to affect you. They'll talk about any options, such as reconstructive surgery, and 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
- 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.

It's important to let your cancer doctor or nurse know if you have concerns about your body image at any point during or after your treatment. There are different ways they can help and support you.

## Reconstructive surgery

If you feel less confident and attractive because of an operation that has changed your appearance, it may be possible to have further surgery to improve it.

For example, women who have had a mastectomy (surgery to remove a breast) can have breast reconstruction. This can be done straight away or years after the first operation. It can help women feel more confident, feminine and sexually attractive. Women who had surgery to remove part of the breast can also have surgery to improve the shape of their breast. Your specialist or breast care nurse will talk to you about this. They can refer you to a specialist surgeon.



You may find our booklet **Understanding breast reconstruction** helpful. You can order a free copy from [be.macmillan.org.uk](http://be.macmillan.org.uk) or call our support line on 0808 808 00 00.

## Improving the appearance of a scar

Scars usually start to look better in the months after your operation. If a scar doesn't improve in appearance, ask your surgeon if there is anything that can be done to help. It may be possible to have surgery to make it less noticeable. Doctors call this scar revision. A surgeon can do this under a general anaesthetic. They can also sometimes do it under a local anaesthetic, where you have an injection to make the area numb.

You usually have to wait at least six months after your first operation to have scar revision.



## Prosthesis

If you wear any type of prosthesis (false body part) and don't feel confident, talk to your nurse or doctor. The prosthesis may not be the right fit, type or colour match for you. They can arrange for you to be reassessed, even if your prosthesis is still in good condition. If you have had the prosthesis for a while, there may be new, improved types available.

For women who have had breast cancer, Breast Cancer Care has information about prostheses (see page 72). For people with facial prostheses, Changing Faces has some information (see page 72).



## 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.

Steroids are often given with chemotherapy or hormonal therapy. They can cause weight gain. Ask your specialist nurse or dietitian for advice.

Some people lose weight if they can't eat enough because of symptoms, treatments, or their side effects. If you have lost weight, it's important to get advice from a dietitian. There are different ways to add calories to food and nutritional drinks and powders to help build up your weight.

It's 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.



We have more information about managing your weight and healthy eating on our website.

Visit [macmillan.org.uk](https://www.macmillan.org.uk) or speak to our cancer support specialists on 0808 808 00 00.

## Managing late treatment effects

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

If you are having problems with lymphoedema, contact your lymphoedema specialist nurse. If you don't have one, ask your doctor to refer you. Some people may need their support sleeve or stocking re-fitted. Or they might need new advice on managing lymphoedema.

If you have bladder or bowel late treatment effects, it's 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 about managing the late effects of cancer treatment. Visit our website at [macmillan.org.uk](https://www.macmillan.org.uk) or speak to our cancer support specialists on 0808 808 00 00.

## Covering up changes

There are different 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 most discreet product, for example a speaking valve after surgery to remove the voicebox (larynx)
- refer you to Changing Faces for advice about camouflage make-up, or to the British Association of Skin Camouflage (see page 72)
- refer you for a replacement part (prosthesis), for example a breast prosthesis (see page 28).

## Covering your head

If you choose to cover your head, there are lots of ways you can do it, for example using wigs, hats, turbans, scarves and 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 (see page 33).

Your hair will usually grow back over a few months once you've finished treatment. It will be very fine at first and may be a slightly different colour or texture than before. You'll probably have a full head of hair after 3–6 months.



You may find our booklet **Coping with hair loss** helpful. You can order a free copy from [be.macmillan.org.uk](http://be.macmillan.org.uk)



## Make-up and beauty treatments

Make-up and beauty treatments can help you make the most of your appearance so you feel better. You can use them to cover up some changes and to take attention away from others.

### 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'll show you how to use products to:

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

Visit **[boots.com/storelocator](https://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 women and teenagers coping with cancer treatment. 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://lookgoodfeelbetter.co.uk)** to find one in your area.

LGFB USA has a cancer care website specifically for men. It gives advice about shaving, skin care, and how to unwind and relax.



You may find our booklet **Feel more like you** helpful. It has expert advice about caring for your skin, hair and nails during cancer treatment.

'I went to a Boots event on the recommendation of the Look Good Feel Better people at the hospital. It was a small group and they told you things about how to make yourself look better and less like a patient. The Boots staff were wonderful and so friendly and lovely. It was good to hear the advice and it was also just really nice to meet all of these people and talk about things and our experiences.'

**Rose**

## **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'd like to cover up. Using camouflage make-up can help.

Changing Faces has trained skin camouflage practitioners (see page 72). They find the best colour match for your skin tone and 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 (see page 28) and it doesn't match your camouflage make-up, go back and see the person who supplied it. They can match the colour to your camouflage make-up.

## Clothing

You can use clothes and accessories to feel comfortable and good about yourself and to cover up certain body changes. What you wear is also a way of expressing yourself. You can look at the clothes you already have to see what's suitable. Ask a family member or friend to help you.

Depending on the body change you have, you can get advice on clothing from lots of support organisations. See pages 72–74 for contact details. Online community forums are also a good place to get advice.





Here are some clothing 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 were used to wearing lower-cut dresses before it, try wearing them with a camisole top underneath.
- High V-neck shirts help if you want to cover a scar or central line (a line into a vein in your chest to give treatments or fluids) in the chest area.
- High, mandarin-type collars or polo necks help cover up your neck area.
- Patterned shirts draw attention to the design 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.
- Be careful not to draw more attention to a change by hiding it. For example, instead of wearing a high-necked jumper in summer, try a lightweight scarf. It does the same thing and is less obvious.

If you need to buy new clothes because of body changes and can't afford it, ask about a Macmillan grant. Call our support line on **0808 808 00 00**.



**'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**

# Relationships, sex and intimacy

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

This could cause difficulties with a partner, delay you getting back to having sex, or 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 no longer find you attractive. But your attractiveness to your partner will be linked to lots of different things. It's not about how a part of your body looks.

If you're not in a relationship, you may worry about how a new partner might react to any body changes. People who have cancer do go on to have close and intimate relationships in the future.

You'll probably need time to recover and adapt to body changes before you feel comfortable about having sex. How long this takes depends on 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 and make you feel more comfortable with each other.

Even if you don't feel like having sex, you may still want to be close to your partner. Focusing on being intimate can take the pressure off. 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 don't improve, talk to your doctor or specialist nurse. Try not to feel embarrassed – they're used to giving advice on intimate problems. They can give information on how to improve sexual difficulties and they can give advice on different ways of looking at problems. They can also refer you to a sex therapist if needed.

There are different ways of dealing with relationship concerns. Here's an example that you might find helpful:

Tanya was diagnosed with cervical cancer and had her womb removed (hysterectomy). This left her feeling like less of a woman. She had two children but was concerned that although she could no longer have children, her partner could. She felt the balance in their relationship had changed.

She talked with her healthcare team about her concerns. They helped her question her feelings to see if there was another way of looking at things. They also encouraged her to look at the different aspects of her femininity. She involved her partner in this process. Tanya thought her fertility was an important part of being a woman. But after talking with her partner, she learnt this wasn't important in his attraction to her as a woman.



We have more information about sex and relationships after cancer treatment. Call our cancer support specialists on **0808 808 00 00** or visit our website **macmillan.org.uk**

# Managing other people's reactions

As you and the people close to you get used to your body changes, you may begin to think about seeing other people. If you have visible changes to your appearance, you may worry about other people's reactions.

Occasionally, some people may make insensitive remarks or unwelcome suggestions. But you'll probably find most people take far less notice of you than you expected. Other people will soon respond to you as a person and not to your appearance.

Learning how to cope with social situations helps build up your confidence. This will help you slowly get back to your usual day-to-day activities. This can include returning to work, or doing any hobbies or sports you did before.

## Being assertive

Learning how to be assertive can help you communicate better with other people.

Assertiveness means facing situations that worry you instead of avoiding them. It means giving your point of view but not getting angry with people when you can't do something.

Being assertive is being able to ask for help and knowing you have the right to:

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

## Dealing with awkward questions

People may want to talk to you to see how you are, or to understand what has happened. It may help to think in advance about the questions you may be asked and some possible answers.

What you tell other people depends on:

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

You can think of different responses, to prepare you for different situations. You could say you don't want to talk about it and smile, even if you don't feel like it, and reassure them that you're fine. Most people ask because they're concerned, and this is a good way of stopping the conversation without causing tension. Or you could give a short response and distract the person by asking them a question or changing the subject. Some people find it helps them feel more in control if they bring up the subject of their body change themselves.

Here are some examples of things you could say:

- 'Thank you for asking, but I'd 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've lost my hair because I'm having chemotherapy. But it will grow back when the treatment's finished. I really like the way your hair is styled – where do you get it done?'
- 'You've probably noticed I've put on weight. It's a side effect of some drugs I'm taking for my cancer treatment. But I'm not worrying about it too much right now.'
- 'I had my operation to remove the cancer and I'm getting used to the changes, but it will take a while.'





## Using your social skills

Social skills help you take control of difficult social situations and manage other people's reactions to your change in appearance. But if you're feeling anxious or low, it can be hard to appear confident and sociable. Try these approaches and see what works for you:

- **Engaging with people** – Making eye contact, smiling and nodding tells people you're 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. For example, you could wear clothes and accessories that make you feel more confident (see pages 35–36).
- **Taking the initiative** – To help you feel more in control, you might want to bring up the subject of your body changes at the right time in a conversation.

These skills aren't 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

You don't have to put up with staring or negative remarks. It's fine to let the person know you're aware of it and want it to stop. Sometimes people don't know they are staring. It only takes a frown or an assertive look from you to help them realise. You can also use other non-verbal signals, such as nodding, smiling or raising your eyebrows. Or you can say something, for example, 'Please don't stare at me. It's only a scar.'

If you are in a situation where you can't walk away and don't 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. They're curious and don't mean any harm, but without a response, they may carry on asking. You could try giving them a simple explanation they can understand. This might be all it takes.



# TAKING CONTROL

---

Helping you take control 48

Developing a positive body image 58

# 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
- being aware of your thoughts
- 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 yourself and ways to help you achieve them.

Each goal should be:

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



You can also break your goal into short-, mid- and long-term goals. Here's an example:

John was anxious about going out in public and had been avoiding his friends. But he wanted to go to a family wedding in six 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 six months' time.

To begin with, John focused on smaller steps to achieve his short-term goal. John kept repeating each step until his anxiety reduced and he felt comfortable and able 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 being able to manage feelings of 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.

You may want to write down a goal and the steps that can help you achieve it.

**Goal:**

**Steps:**



## Problem solving

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

You can do this through a series of steps:

- **Step 1 – Identify the problem.** Be as specific as possible and write down the problem.
- **Step 2 – Think of possible solutions.** Write down any solutions that may help. Think about how you have solved problems in the past, or what your family or friends would advise.
- **Step 3 – Decide on a solution.** Think about the advantages and disadvantages of each possible solution. This will 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.** Breaking it into smaller steps can make it easier and more manageable to do it.
- **Step 5 – Try it out and review how it worked.** Follow the steps to carry out the solution at your own pace. If you solve the problem, use this approach for other problems. If it hasn't worked, go back and try it with another of your solutions.

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



Here's an example of problem solving:

David had problems swallowing, due to a dry mouth caused by radiotherapy. He was worried about not being able to eat out, which he'd 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. After learning this would be okay, 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:**

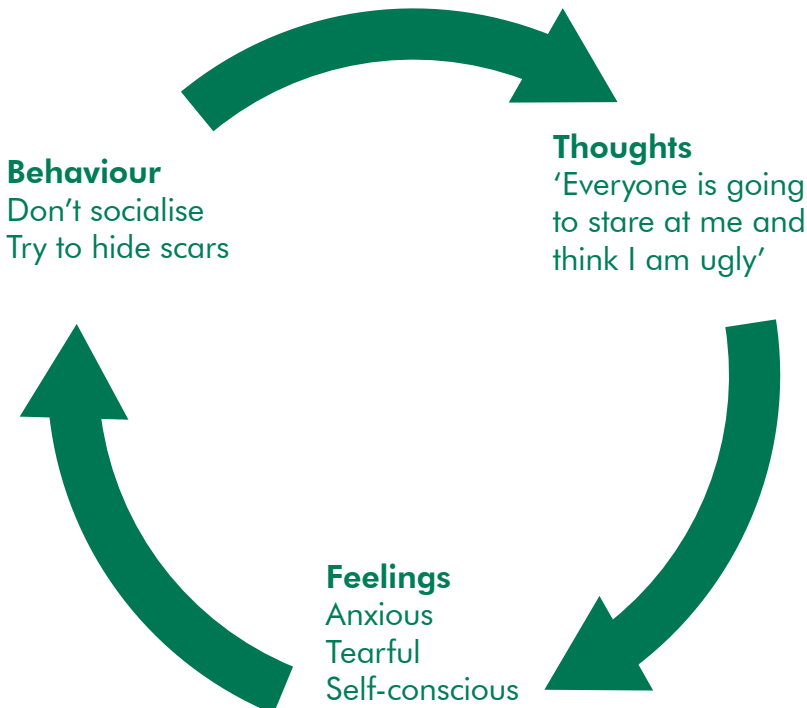
**Review:**

## Being aware of your thoughts

Thoughts go through our minds all the time. We're often not aware of them. They may be influenced by past experiences, or based on wrong assumptions or inaccurate facts.

It's not unusual to have some unhelpful or negative thoughts when you're coping with cancer and body changes. But if this becomes a usual way of thinking, it can affect your mood and make you less confident and more anxious. You may ignore positive things about yourself and believe your negative thoughts are true.

Becoming more aware of your thinking can help you see unhelpful patterns and the effect they have on your mood and behaviour. Some people find it helpful to write down their thoughts to see if there is a pattern (see page 19).



## Challenging unhelpful thinking

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

- Is what I'm thinking definitely right – what's the evidence for and against my thinking?
- How could someone else see this situation?
- What would I say to a friend who had this thought in a similar situation?
- Are my thoughts helpful to me, or do they stop me from doing and getting what I want?
- Am I jumping to conclusions, seeing the negative, forgetting the positive or getting things out of proportion?
- 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. On pages 55–56, we list a few of these and give some examples. We also show how you can change unhelpful thoughts into more balanced, positive thoughts.

## Over-generalising

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

### Negative thought

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

### Balanced, positive thinking

'Some people will stare, but it will probably be out of curiosity. I'll have my friends with me for support.'

## Taking things personally

When you're feeling anxious or low, it's easy to jump to conclusions or 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 who was better suited to it.'

## Mental filtering

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**

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'm aware of my body changes, but my partner may not notice it so much. Anyway, I have other attractive qualities that they love.'

## **Black and white thinking**

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 then I can't go to the restaurant with my family.'

### **Balanced, positive thinking**

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

## Cognitive behavioural therapy (CBT)

There are many self-help books and online resources to help you understand your ways of thinking. Look at online information sources such as NHS Choices ([nhs.uk](https://www.nhs.uk)) and NHS Inform for Scotland ([nhsinform.co.uk](https://www.nhsinform.co.uk)) for advice on replacing unhelpful thoughts with more realistic and balanced ones. This approach is called CBT. CBT teaches you new skills and helps you understand how to react more positively to situations that would usually cause you anxiety.

But if you are struggling with difficult feelings about your body image, it's best to talk to your doctor or nurse for advice. They can refer you to a psychologist or counsellor trained in CBT.

## 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 some CBT to help you change thought patterns. A few centres in the UK offer MBCT classes on the NHS.

# Developing a positive body image

You need time to recover from treatment and adapt to body changes, especially if they are 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 good about it getting you through treatment. You may find you appreciate what it does for you every day.

Feeling good about yourself makes you more confident and self-accepting. It gives you an attractiveness that's about more than how you look. You may discover qualities you didn't know you had or find certain relationships are now closer.

Take time out 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 the things you like about yourself and your appearance. You can use page 77 to do this.
- 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.
- Try to replace negative thoughts about your body with positive thoughts.
- Make the most of your best features by using make-up or clothes to draw attention to them. Have your hair styled or keep it groomed.

## Make healthy choices

Eating healthily, getting enough sleep and being more physically active are ways of taking care of your body. Not smoking or 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.

## Be more active

Doing regular physical activity can help you feel better about your body, its strength and what it's capable of doing. It makes you feel less tired and helps release chemicals (endorphins) that lift your mood and lower stress hormones. It can be an opportunity to take up a new type of activity you wouldn't have thought of before. There are lots of different activities you can get involved with. Short walks that you build up gradually 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's 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 healthily

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

Try to eat:

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

A balanced diet helps keep your weight healthy. It also reduces the risk of other diseases, such as diabetes and heart disease.



You may find our booklets **Physical activity and cancer** and **Healthy eating and cancer** helpful. You can order free copies from [be.macmillan.org.uk](https://be.macmillan.org.uk)



## Sleep well

We all feel and look better after a good night's sleep.

Cancer treatment can make you tired for weeks or sometimes even months after it's over. Feeling anxious can also stop you sleeping. If you're having problems sleeping, ask your doctor or nurse for advice.

## Don't smoke and limit the amount of alcohol you drink

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. It also causes premature skin ageing. Within a few weeks of stopping, your skin will look clearer and brighter. Straight away, your breath, hair and clothes will smell better.

Stick 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.

Men and women are advised not to regularly drink more than 14 units of alcohol a week. Try to have several alcohol-free days a week. If your doctor has advised you to stop drinking, it's important to follow this advice.

It can be hard to stop smoking or cut down on alcohol when you're feeling anxious and stressed. Ask your doctor or nurse for advice. There's lots of different support to help you.



You may find our booklet **Giving up smoking** helpful. You can order a free copy from [be.macmillan.org.uk](http://be.macmillan.org.uk)







**WE ARE HERE TO HELP**  
We are here to help you with all your cancer needs.

**SEX AND RELATIONSHIPS**  
A practical guide to living with and after cancer

**SIDE EFFECTS OF CANCER TREATMENT**  
A practical guide to living with and after cancer

**UNDERSTANDING THYROID CANCER (GLANDULAR AND PAPILLARY)**  
A practical guide to living with and after cancer

**CANCER**  
A practical guide to living with and after cancer

**OUR LUNGS**  
A practical guide to living with and after cancer

# FURTHER INFORMATION

---

About our information	67
Other ways we can help you	69
Other useful organisations	72
Your notes and questions	77



# About our information

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

## Order what you need

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

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

All of our information is also available online at **macmillan.org.uk/cancerinformation**. There you'll also find videos featuring real-life stories from people affected by cancer, and information from health and social care professionals.

## Other formats

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

- audiobooks
- Braille
- British Sign Language
- Easy Read booklets
- ebooks
- large print
- translations.

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

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



## Help us improve our information

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

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

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



# Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we're here to support you. No one should face cancer alone.

## 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 Monday–Friday, 9am–8pm. Our cancer support specialists can:

- help with any medical questions you have about your cancer or treatment
- help you access benefits and give you financial advice
- 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](https://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](https://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 guidance team can give you advice 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](https://www.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](https://www.macmillan.org.uk/work)**



### Macmillan's My Organiser app

This free mobile app can help you manage your treatment, from appointment times and contact details, to reminders for when to take your medication. Search 'My Organiser' on the Apple App Store or Google Play on your phone.

## Other useful organisations

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

### **Breast Cancer Care**

5–13 Great Suffolk Street,  
London SE1 0NS

**Helpline** 0808 800 6000

(Mon–Fri, 9am–5pm,  
Sat, 9am–2pm)

**Textphone** 0808 800 6000

#### **Email**

[info@breastcancercare.org.uk](mailto:info@breastcancercare.org.uk)

**[www.breastcancercare.org.uk](http://www.breastcancercare.org.uk)**

#### **org.uk**

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

### **Changing Faces**

The Squire Centre,  
33–37 University Street,  
London WC1E 6JN

**Helpline** 0300 012 0275

**[www.changingfaces.org.uk](http://www.changingfaces.org.uk)**

**[www.iface.org.uk](http://www.iface.org.uk)**

(for young people aged 11–21)

Offers support and information for adults and children who have any sort of disfigurement, and their families, with the aim of building effective coping strategies and self-confidence.

### **British Association of Skin Camouflage**

PO Box 3671,  
Chester CH1 9QH

**Tel** 01254 703 107

**[www.skin-camouflage.net](http://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.

### **Colostomy Association**

Enterprise House,  
95 London St,  
Reading RG1 4QA

**Helpline** 0800 328 4257  
(24 hours a day,  
7 days a week)

**Email** [cass@colostomyassociation.org.uk](mailto:cass@colostomyassociation.org.uk)  
**www.colostomyassociation.org.uk**

Offers support and information to anyone who has had a colostomy or is facing one. Produces a range of free literature with useful guidance. Offers home and hospital visits by experienced colostomates and telephone support.

### **IA (Ileostomy and Internal Pouch Support Group)**

Peverill house,  
1–5 Mill Road,  
Ballyclare BT39 9DR

**Tel** 0800 0184 724  
**Email** [info@iasupport.org](mailto:info@iasupport.org)  
**www.iasupport.org**

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

### **Let's Face It**

72 Victoria Avenue,  
Westgate-on-Sea CT8 8BH

**Tel** 01843 833 724

**Email** [chrisletsfaceit@aol.com](mailto:chrisletsfaceit@aol.com)

**www.lets-face-it.org.uk**

Self-help organisation for people with facial disfigurement that provides telephone support, social activities, dietary and medical advice, as well as information about camouflage make-up.

### **Look Good...Feel Better**

West Hill House,  
32 West Hill,  
Epsom KT19 8JD

**Tel** 01372 747 500

**Email** [info@lgfb.co.uk](mailto:info@lgfb.co.uk)  
**www.lookgoodfeelbetter.co.uk**

A free cancer support service for women living with cancer. Holds free skincare and make-up workshops to help combat the visible side effects of cancer treatment and boost confidence and well-being.

### **The National Association of Laryngectomee Clubs**

Suite 16, Tempo House,  
15 Falcon Road,  
London SW11 2PJ

**Tel** 020 7730 8585

**Email** info@

[laryngectomy.org.uk](http://laryngectomy.org.uk)

**[www.laryngectomy.org.uk](http://www.laryngectomy.org.uk)**

Aids rehabilitation of people who have had laryngectomy surgery.

Provides pre- and post-surgery support, information, and speech and language therapy.

### **Saving Faces**

First Floor – Grove Building,  
Mile End Hospital,  
Bancroft Road,  
London E1 4DG

**Helpline** 07792 357 972

(Mon–Fri, 9am–5pm)

**Email** [helpline@](mailto:helpline@savingfaces.co.uk)

[savingfaces.co.uk](http://savingfaces.co.uk)

**[www.savingfaces.co.uk](http://www.savingfaces.co.uk)**

Gives information about facial surgery research and links new patients with former patients who can provide advice and support.

### **General cancer support organisation**

#### **Cancer Black Care**

79 Acton Lane,  
London NW10 8UT

**Tel** 020 8961 4151

**Email** info@

[cancerblackcare.org.uk](http://cancerblackcare.org.uk)

**[www.cancerblackcare.org.uk](http://www.cancerblackcare.org.uk)**

Offers information and support for people with cancer from ethnic communities, their friends, carers and families.

#### **Cancer Focus**

##### **Northern Ireland**

40–44 Eglantine Avenue,  
Belfast BT9 6DX

**Helpline** 0800 783 3339

(Mon–Fri, 9am–1pm)

**Email** [hello@cancerfocusni.org](mailto:hello@cancerfocusni.org)

**[www.cancerfocusni.org](http://www.cancerfocusni.org)**

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

## Cancer Support Scotland

The Calman Centre,  
75 Shelley Road,  
Glasgow G12 0ZE

**Tel** 0800 652 4531

**Email** info@

cancersupportscotland.org

**www.cancersupport  
scotland.org**

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

## Maggie's Centres

20 St. James Street,  
London W6 9RW

**Tel** 0300 123 1801

**Email** enquiries@

maggiescentres.org

**www.maggiescentres.org**

Provides information about cancer, benefits advice, and emotional or psychological support.

## Tenovus

Head Office,  
Gleider House,  
Ty Glas Road,  
Cardiff CF14 5BD

**Helpline** 0808 808 1010

(Mon–Sun, 8am–8pm)

**Email** info@

tenovuscancercare.org.uk

**www.tenovus.org.uk**

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

## Counselling and emotional support

### Anxiety UK

Zion Community Centre,  
339 Stretford Road, Hulme,  
Manchester M15 4ZY

**Tel** 08444 775 774

**Email** support@

anxietyuk.org.uk

**www.anxietyuk.org.uk**

Promote the relief and rehabilitation of people suffering with anxiety disorders through information and provision of self-help services.



**British Association  
for Counselling and  
Psychotherapy (BACP)**

BACP House,  
15 St John's Business Park,  
Lutterworth LE17 4HB

**Tel** 01455 883 300

**Email** [bacp@bacp.co.uk](mailto:bacp@bacp.co.uk)

**www.bacp.co.uk**

Promotes awareness of  
counselling and signposts  
people to appropriate  
services. You can search  
for a qualified counsellor at  
**[itsgoodtotalk.org.uk](http://itsgoodtotalk.org.uk)**

**UK Council for  
Psychotherapy (UKCP)**

2<sup>nd</sup> Floor, Edward House,  
2 Wakley Street,  
London EC1V 7LT

**Tel** 020 7014 9955

**Email** [info@ukcp.org.uk](mailto:info@ukcp.org.uk)

**www.psychotherapy.org.uk**

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

**Samaritans**

Freepost RSRB-KKBY-CYJK,  
Chris, PO Box 9090,  
Stirling FK8 2SA

**Helpline** 116 123

**Email** [jo@samaritans.org](mailto: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.



You can search for more organisations on our  
website at **[macmillan.org.uk/organisations](http://macmillan.org.uk/organisations)**  
or call us on **0808 808 00 00**.

# YOUR NOTES AND QUESTIONS

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

## 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 are of models.

## Thanks

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

With thanks to: Morven Angus, Lead Breast Nurse; Dr Christopher Hewitt, Consultant Clinical Psychologist; Dr Marilyn Owens, Macmillan Consultant Psychologist; Caroline Rennie, Head and Neck Cancer Clinical Nurse Specialist; and Dr Heidi Williamson, Research and Health Psychologist. Thanks also to the people affected by cancer who reviewed this edition, and those who shared their stories.

## Sources

We've listed a sample of the sources used in the publication below. If you'd like further information about the sources we use, please contact us at **[bookletfeedback@macmillan.org.uk](mailto:bookletfeedback@macmillan.org.uk)**

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

Cash, Smolak. *Body image: a handbook of science, practice and prevention*. Guilford Press. 2011.

Gingeret, et al. Managing body image difficulties of adult cancer patients. *Cancer*. 2014.

Fingeret, et al. Body image: a critical psychosocial issue for patients with head and neck cancer. *Current Oncology Report*. 2015.

# 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](http://macmillan.org.uk/getinvolved)**

## Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £

(Please delete as appropriate)

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

OR debit my:

Visa / MasterCard / CAF Charity  
Card / Switch / Maestro

Card number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Valid from

--	--	--	--

Expiry date

--	--	--	--

Issue no

--	--	--	--

Security number

--	--	--	--

Signature

Date / /

## Don't let the taxman keep your money

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

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

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax in each tax year, that is at least equal to the tax that Charities & CASCs I donate to will reclaim on my gifts. I understand that other taxes such as VAT and Council Tax do not qualify and that Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

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

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



If you'd rather donate online go to [macmillan.org.uk/donate](https://macmillan.org.uk/donate)

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

More than one in three of us will get cancer. For most of us it will be the toughest fight we ever face. And the feelings of isolation and loneliness that so many people experience make it even harder. But you don't have to go through it alone. The Macmillan team is with you every step of the way.

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

Together, we are all Macmillan Cancer Support.

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

Hard of hearing? Use telephone  
0808 808 0121, or Text Relay.

Non-English speaker? Interpreters available.  
Braille and large print versions on request.

© Macmillan Cancer Support, February 2016. 3<sup>rd</sup> edition. MAC14192.  
Next planned review 2018. Macmillan Cancer Support, registered  
charity in England and Wales (261017), Scotland (SC039907) and the  
Isle of Man (604). Printed using sustainable material. Please recycle.



**WE ARE  
MACMILLAN.  
CANCER SUPPORT**