

OVERVIEW OF CANCER FACTSHEET

Q Why have we produced a factsheet on cancer?

A As we all get older, we hear about more people we know getting cancer. It can be very scary, and most of us have lost people we know and love to cancer. Cancer gets more common as we get older - around 80% of cancer diagnoses are in people aged over 50.

The commonest types of cancer are Breast, Prostate, Lung, Bowel and Bladder.

A person's risk of developing cancer depends on many different things, including age, genetics, and exposure to risk factors. But nearly 40% of cancers are caused by lifestyle factors and could be prevented.

The earlier cancer is detected, the more likely it is to be treatable. Attending screening improves the chances of catching cancer at an early treatable stage.

Q How likely am I to get cancer?

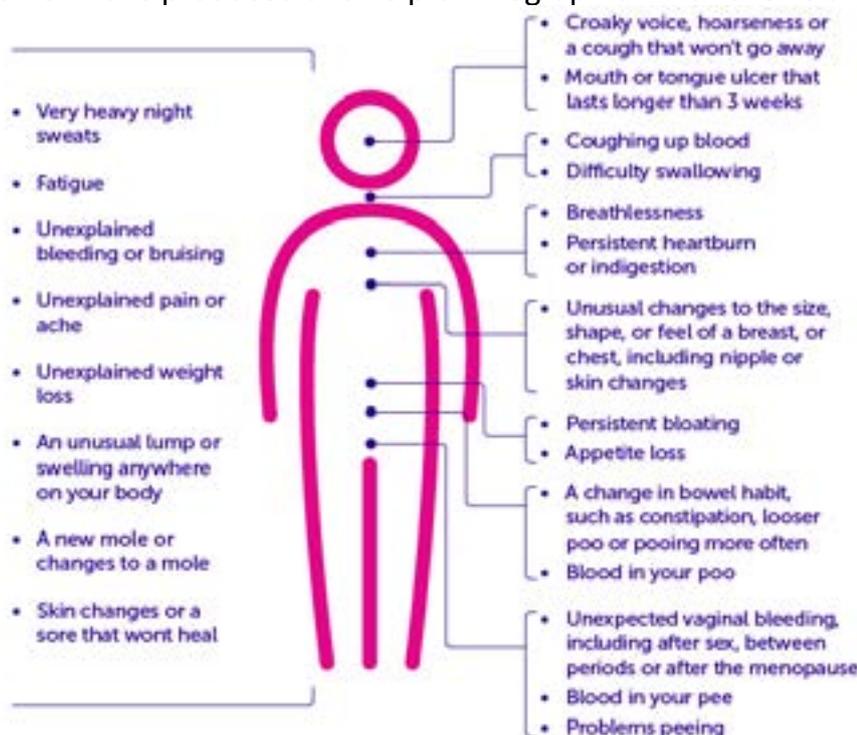
A 1 in 2 people born around 1960 or after will develop cancer at some point in their life. The chances of being diagnosed with cancer increases with age.

Q Am I more likely to get cancer because of my thalidomide damage?

A We have looked at the number of beneficiaries who have reported a diagnosis of cancer to us and analysed this against the national average. There is currently no evidence to suggest that you are at higher risk of cancer because of your thalidomide damage.

Q How can I spot the signs of cancer early?

A It is good to be aware of, and alert to, the most common symptoms associated with cancer. Cancer Research UK have produced this helpful infographic which shows the key things to look out for:



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However, this is not a complete list so if you experience any unexplained symptoms or unusual changes to your body, it is best to talk to your GP about them. If you are worried about any symptoms and are struggling to make an appointment with your GP, please speak to one of the Medical Advisers at the Trust.

Q What are screening tests?

A Screening tests are designed to catch cancer at an early stage when it is more treatable - even when there are no symptoms that you have noticed - so it is important that you respond to invitations to attend routine screenings.

Q What screening is available?

A The key screening available are cervical screening, breast screening, bowel screening and prostate screening. Further information on each of these is provided below:

Cervical screening, often known as 'smear tests', are available for women up to the age of 65. These are usually done every five years and if you have a clear test after the age of 60 then you won't normally be called for another one.

Breast screening Mammograms are available for women every three years between the ages of 50 and 70, but you can continue to ask for regular mammograms up to the age of 70. These use x-rays to check for any abnormal looking tissue in the breasts which are an indication of cancer.

Bowel screening is available for both men and women every two years between the ages of 60 and 74 in England and Northern Ireland, 50-74 in Scotland and 55-74 in Wales. You will be asked to provide a small sample of poo and send this to the lab to check for blood. You could put a clean plastic tub on the lid of the toilet to catch the poo for the sample. You rub the stick over the surface of the poo as that is where any blood cells might be. Once the sample is taken, make sure the lid is firmly back on the sample pot to make sure it doesn't leak. If you have difficulty with your grip, you might need some help with this.

Q What about Prostate screening for men?

A Although a common form of cancer for men, prostate screening is not currently available as a national programme. This is because the blood test called the PSA test is not currently considered accurate enough to use for screening purposes.

If you have any symptoms relating to poor flow of urine or need to get up to pee more than twice in the night, your prostate might need checking.

A full check usually involves a doctor examining your prostate (through the back passage) to check for lumps and a blood test to check your PSA hormone level. It is important to have the examination as you can still have prostate cancer even with a normal PSA test.

Q Are there any other checks I should be doing myself?

A It is important for all women to check their breasts regularly between mammograms and report any new lumps to their GP urgently.

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We appreciate that it can be difficult for beneficiaries with upper limb damage to check your own breasts, so we have produced an additional Breast Check Factsheet.

It is also important to be aware of changes to your bowel movements and to check for blood in your poo. Check the toilet before flushing regularly, even if you use a wash/dry toilet.

If you have any blood showing in your poo, you are opening your bowels more frequently or the stools are looser for three weeks, contact your GP urgently even if you have had a recent bowel screening test and the result was normal.

Q What steps can I take to reduce my risk of cancer?

A There are steps you can take to reduce the likelihood of you developing cancer.

15 % of cancers are caused by smoking so stopping smoking is the single most effective way of reducing your risk of cancer.

About 20% of cancers are caused by being very overweight, alcohol consumption, diets low in fruits/ vegetables and fibre and low physical activity. Reducing your alcohol intake, losing some weight, and moving more will all help reduce your risk of cancer.

You can also reduce the risk of developing skin cancer by reducing your exposure to sun.

Q Is there help available to stop smoking?

A We know it can be really difficult to stop smoking, especially when you have been smoking for many years. If you would like advice and support to help you stop smoking, you can :

- Call the free National Smokefree Helpline on:
England: 0300 123 1044 9am- 8pm Mon-Friday
Wales: 0800 085 2219.
Scotland: 0800 84 84 84
Northern Ireland: check the website for your local adviser stopsmokingni.info/ways-quit/local-help-and-support
- Speak to the smoking cessation adviser at your GP surgery
- Contact the Medical Advisers at the Trust.

Vaping is probably safer than smoking but giving up completely is the best option.

There is evidence that having support to help you quit makes you twice as likely to succeed than giving up without support.

Read David's story about the benefits of giving up smoking here thalidomidetrust.org/your-stories/giving-up-smoking

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Q I've found it difficult to change my diet and become more physically active. Is there help available??

A There are lots of resources about diet and lifestyle on the Trust website.

- The healthy diet section has loads of information about how to improve your diet and eat more healthily without compromising on taste www.thalidomidetrust.org/health-and-wellbeing/living-well/food-and-nutrition/
- Check out the alcohol awareness webinar to make sure you know how much you are drinking and for tips on cutting down if needed www.thalidomidetrust.org/health-and-wellbeing/health/alcohol-and-health/.
- If you are finding it hard to be more active, why not sign up to our 'Activity Buddy' scheme? This puts you in touch with a trained beneficiary volunteer who can help you make small positive changes that will make you feel better as well as reducing your risk of cancer. Contact Annabelle (annabelle.blackham@thalidomidetrust.org) to find out more.

Q How can I stay safe in the sun?

A The best thing you can do is to stay mostly in the shade, particularly in the middle of the day when the sun is at its hottest. However, there are other things you can do to reduce your exposure to the sun:

- Always wear a broad-brimmed hat where possible. Try to choose one that fits snugly to your head and won't blow off easily in a breeze.
- Wear factor 30 to factor 50 sunscreen if out in the sunshine and remember to re-apply frequently for maximum benefit. Long handled lotion applicators can help to get to the hard-to-reach areas. Even low-level sunlight can burn.
- If you can't put sunscreen on yourself and don't have someone to help, consider wearing a light long-sleeved shirt and trousers/skirt that cover your legs fully.

Q When should I worry about cancer?

A It's really hard to know which symptoms can be ignored for a while and which are important to act on straight away. It's always best to listen to your body - you know it best.

If something doesn't feel right, you spot any unexpected changes in your body or you have symptoms that last for more than two or three weeks then we recommend getting it checked out. If you are uncertain and would like to discuss your concerns before approaching your own GP, please ask to speak to one of our Medical Advisers.

Q Where can I find out more?

A If you have other questions you can arrange to speak to one of the Trust's Medical Advisers. Call us on 01480 474074 or email hello@thalidomidetrust.org