
The Next Stage

Recovery and
Adjustment

Leukaemia Care
YOUR Blood Cancer Charity

Introduction

Adjusting back to a normal lifestyle after diagnosis and treatment of a blood or lymphatic cancer can be the hardest part of your cancer journey. This booklet is designed to provide you with information on how to begin rebuilding your lifestyle, and the hurdles you may face.

You may experience all of the problems featured in this booklet, some of them, or maybe none at all. Experiences vary from person to person, and the time it takes to re-adjust to 'normal' can also vary. This booklet, and the organisations listed in it, are available to help you whatever you may be facing.

Remember, you can also find tailored advice for your particular situation from your medical team.

Booklet compiled and updated by Dr John Donohue, Dr Ziv Amir, Anne Crook, Linda Boyne, Amanda Bland, Trish McQueen and Marie Krnakova, Joanna Injore, Nick Trott, Elizabeth Tydeman, Andy Burman Dobrin Neykov Deborah Stalkartt and Geraldine Dora.

If you would like any information on the sources used for this booklet, please email communications@leukaemiacare.org.uk for a list of references.

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About Leukaemia Care

Leukaemia Care is a national charity dedicated to ensuring that people affected by blood cancer have access to the right information, advice and support.

Our services

Helpline

Our helpline is available 9.00am - 10.00pm on weekdays and 9.30am - 12.30pm on Saturdays. If you need someone to talk to, call **08088 010 444**

Nurse service

We have two trained nurses on hand to answer your questions and offer advice and support, whether it be through emailing **nurse@leukaemicare.org.uk**, over the phone on **08088 010 444** or via LiveChat.

Patient Information Booklets

We have a number of patient information booklets like this available to anyone who has been affected by a blood cancer. A full list of titles – both disease specific and general information titles – can be

found on our website at **www.leukaemicare.org.uk/support-and-information/help-and-resources/information-booklets/**

Support Groups

Our nationwide support groups are a chance to meet and talk to other people who are going through a similar experience. For more information about a support group local to your area, go to **www.leukaemicare.org.uk/support-and-information/support-for-you/find-a-support-group/**

Buddy Support

We offer one-to-one phone support with volunteers who have had blood cancer themselves or been affected by it in some way. You can speak to someone who knows what you are going through. For more information on how to get a buddy call

08088 010 444 or email
support@leukaemicare.org.uk

Online Forum

Our online forum, **www.healthunlocked.com/leukaemia-care**, is a place for people to ask questions anonymously or to join in the discussion with other people in a similar situation.

Patient and carer conferences

Our nationwide conferences provide an opportunity to ask questions and listen to patient speakers and medical professionals who can provide valuable information and support.

Website

You can access up-to-date information on our website, **www.leukaemicare.org.uk**, as well as speak to one of our care advisers on our online support

service, LiveChat (9am-5pm weekdays).

Campaigning and Advocacy

Leukaemia Care is involved in campaigning for patient well-being, NHS funding and drug and treatment availability. If you would like an update on any of the work we are currently doing or want to know how to get involved, email **advocacy@leukaemicare.org.uk**

Journey magazine

Our quarterly magazine includes inspirational patient and carer stories as well as informative articles by medical professionals. To subscribe go to **www.leukaemicare.org.uk/communication-preferences**

A note from the Patient Services team

We hope that you find this booklet helpful, and you can relate to some of the emotions we are going to talk about.

We realise that it can often be hard adjusting when you are at home after finally finishing treatment. You may have suddenly gone from a position of regular monitoring to now being told you don't need to attend for a longer period of time, or even not at all, and are expected to 'get back to normal'. You may have a whole host of questions unrelated to your illness, about your relationships, your feelings or even practical issues like getting back to work.

We have touched on aspects in this booklet that we often find patients ask about. Please keep in mind that everyone's experience is different, and you may find some sections more useful than others.

Always remember that any medical questions should go to the healthcare team you are dealing with. We are a national charity focused on providing information and support, which

is what we have provided in this booklet. We have also offered some signposting to other organisations that can give you practical advice tailored to your exact situation. Likewise, if you just need a chat, call us on the number below.

If you have any questions about the information in this booklet, or you would like to know where else you may find information that you need, just call us on **08088 010 444**.



Effects on your emotions

With thanks to Anne Crook, Counsellor at the Christie NHS Foundation Trust; Dr John Donohue, Chartered Clinical Psychologist, Haematology and Oncology; Marie Krnakova, BA Hons Relaxation and Mindfulness Therapist; and Trish McQueen, patient.

After diagnosis and treatment, adjusting back to normal can have a huge effect on your emotions. Everyone comes through the experience of cancer and its treatment in their own, individual way – there is no blueprint for coping in a particular way. The emotional effects described may or may not apply to you but they are common to people who have had this experience and are meant to reassure you that you are responding in a ‘normal’ way to a challenge unlike any other.

During treatment all of your emotional energy is focused on getting through treatment and your day-to-day survival. Many people cope with this period reasonably well despite the physical and emotional challenges it brings.

When treatment ends and you are

trying to get back to ‘normal’, you may be surprised to find yourself experiencing strong emotions. This is not unusual because your emotions are ‘catching up’ with all that you have been through. This emotional process helps you to integrate the experience into your life and to gradually move into the future.

Living with uncertainty

It is the case for many patients that the process of treatment is very challenging. You may at the beginning wonder how you will cope with the various procedures. As time goes by, and a routine develops, you may have built a good relationship with your medical team, which can be very self-contained and perhaps a ‘safe haven’. You will know that all that can be done is being accomplished.

However, when treatment

finishes, the feeling of security from the team will become less available and often the feeling of uncertainty about the future and the potential of disease reoccurrence can begin to take hold. The thoughts of 'what might be happening in my body' can linger in your mind for quite some time feeding into anxiety, depression and a range of other emotions. Ironically, revisits to see the consultant can be something of a mixed blessing. On the one hand, confirmation that your 'counts' or 'markers' are fine can alleviate worries, but on the other hand, each visit can be hallmarked with anxiety. Sometimes you may worry if 'nothing more can or will be offered' and spur the question 'what then?'. Repeat visits to your GP or ritualistic self-monitoring/checking can become a way of coping with anxiety and preoccupation with the disease.

You may be faced with gaining a sensible balance between vigilance over the signs of disease reoccurrence and getting on and continuing to live your life, which is perhaps the most effective

armour against unnecessary anxiety. Information and kind support from your healthcare team can do much to encourage your re-adjustment, and time in this case is 'a good healer'. In some cases, a referral to a counsellor can be extremely helpful in helping you cope with preoccupation and facilitate a rebalance in your life.

Moving away from treatment and back into your own lifestyle can be a very difficult time, and it is important to allow yourself the time to adjust. You may experience a range of emotions but remember that this is a perfectly normal reaction.

Isolation

There is the temptation to quickly put the experience behind you and to move on from it. Most people find that this process takes as long as it takes. It involves the discovery of your 'new normal' because life inevitably takes on a new meaning after serious illness.

You may find that you feel quite isolated and alone during this time. You may miss the security of

Effects on your emotions (cont.)

frequent hospital visits with the support of your healthcare team who could provide reassurance and fellow patients who could understand some of what you are feeling.

Perhaps family and friends expect you to be alright now that has treatment finished and they too will be impatient for life to get back to normal. You may not want to worry them by talking about your feelings and may be feeling guilty for what they have been through. You may resent others for not asking how you are or acting as if nothing has happened. Remember that your family and friends are there to support you, so try and share how you feel with them, even if you simply say you still need support from them.

Alternately, you may dread having to talk about your illness and resent being defined by it. These conflicting feelings can leave you feeling tense and confused. You may need to push yourself to talk to others so that they know how you are feeling. If you do not want to talk about your illness, change the subject by asking the other

person about themselves.

Probably the best way to deal with feelings of isolation is to be clear about what you want. Tell those around you that you do/do not want to talk about your illness. Just because you have finished treatment does not mean that you are left alone to resume your life again. Use your family and friends for support if you need to, and contact your medical team if you are worried.

Anxiety

Anxiety and fear is our natural response to when we feel threatened. It is helpful when we are in danger because the physical responses such as increased heart rate, rapid breathing and muscle tension help us to face a danger or run away. It is less helpful when we are preoccupied by anxious thoughts that can affect sleep or cause us to avoid previous activities. When worry takes off it can leave us feeling exhausted.

Each pain, niggle or hospital appointment can set off fearful thoughts about the cancer

recurring. This is to be expected and will recede over time as you pick up your daily life again and plan for some future events to look forward to. If you find yourself constantly checking, seeking reassurance or if the fears stop you from doing things, talk this over with your healthcare team.

Complementary therapies and relaxation exercises can help with the physical effects of anxiety and cognitive behavioural therapy (CBT) can help to get the worrying thoughts back into perspective.

"Almost everyone can learn and use relaxation and mindfulness techniques. To get the best results, these techniques should be practised regularly, and if unable to attend classes, CDs are a great alternative."

Mindfulness and Relaxation

Simple relaxation, mindfulness, breathing techniques and exercises may help to calm the mind and release any muscle tension and pain. To start with, make yourself comfortable either by sitting on a chair or lying

down on a blanket or yoga mat with cushions supporting your body. Loosen any tight clothing and for a few moments observe your breathing without trying to change anything or make anything happen.

Simply observe how the chest and abdomen rise as you breathe in and out, slowly and calmly, or if you prefer you can focus on the sensation of the air passing through your nostrils and any feelings and thoughts that may arise as you continue with this exercise. Allowing the breath to settle down into its natural rhythm and trusting the process that after each inhale, an exhale will follow guiding your mind and body into a comfortable, quiet pause that naturally happens between each breath.

As you do so, begin to imagine or visualise that the air you are breathing in is pure relaxation and that the air you are breathing out is tension, pain, discomfort or any other negative or unwanted sensations, thoughts or feelings. Keep breathing deeply and calmly,

Effects on your emotions (cont.)

relaxing with each breath you take and continue to exchange tension and relaxation through your breath for a few more moments.

It is normal and natural for your thoughts to wander during this exercise. Just accept the thoughts as they come, and let them pass while you return your attention back to your breathing, noticing how calm and relaxed you feel. When you are ready to finish this exercise, give yourself time to explore and fully experience these new feelings of deep relaxation before you open your eyes.

If you are really worried about something you are experiencing, contact your medical team. They may be able to help you identify what you should be looking out for, if anything.

Share your anxiety with others. You may find that by sharing this you can try and rationalise what you feel anxious about. Thinking about why you feel concerned or are dreading a certain upcoming event may help you say that perhaps it does not

warrant such anxiety. This is not to say that your anxious feelings are not rational; your feelings are important, and should not be disregarded. Thinking about why you feel this way can help calm you. For more information on anxiety, take a look at www.nhs.uk/conditions/anxiety

Diet

Monitoring your intake of certain foods can help reduce anxiety levels. If you take in a lot of caffeine, you may want to consider reducing it because it can stop you from sleeping. Alcohol can also increase anxiety.

Anger

Anger is an uncomfortable emotion but is a very normal response when we feel challenged or threatened in some way. You may feel angry with yourself, your body, with the healthcare team or with family and friends. This may be expressed through impatience and irritability with those around you and feeling frustrated with things that usually would not bother you.

Try and pinpoint what it is that makes you angry, so you can find an effective solution.

Setting gradual goals for yourself can help you ease any anger and impatience associated with your body and healthcare. As you begin to achieve more and more, you will find that your anger decreases.

Taking part in physical exercise can be a great way to release anger into something that will not upset anybody. It is an effective way to channel your angry energy.

Try to talk through why you are feeling angry. This way, you are less likely to lash out at somebody. This can also calm any anger you may have before you find it too difficult to deal with.

Sadness and depression

Illness brings with it a sense of loss and we can find ourselves grieving for the person we were and the security that we felt. You may feel sad about the impact of illness on yourself and those around you. There may be times

when you feel low in mood. This is part of the normal recovery process.

If you find that your low mood persists for some weeks, that you feel hopeless and you have lost interest and pleasure in things, you may have depression. Seek help from your doctor if you or those around you are concerned about your mood.

It might help to take part in small activities that you enjoyed before your diagnosis, as far as your health allows. This can help you connect back with your life before treatment, and give you a sense of normality.

Try and talk about your sadness, as sharing this will allow others to try and help you see another perspective. This may help alleviate this feeling.

Self-confidence

You may feel less sure of yourself and your place in daily life when treatment ends and it can take time to regain your self-confidence. The intrusion of

Effects on your emotions (cont.)

illness in your life and particularly the treatment that comes with it can break down your sense of self-worth and your role in the world.

You could lose confidence and self-esteem as a result of unwanted changes in your lifestyle that your treatment may have caused. For example, limitations in terms of energy can interrupt your time with loved ones, friends, and your ability to work. Having to conform to your hospital calendar may lead to a feeling that your life is no longer your own, and that it is in the hands of your medical team.

Coming away from treatment can leave you with a sense of loss for your former self.

Your feelings about your body may have changed – perhaps feeling that it has let you down by getting cancer. You may be self-conscious or feel sad about how you look and how you feel, particularly if you are experiencing fatigue. You may no longer feel attractive or sexy. It takes time to gradually come to terms with your appearance and others will be more accepting and reassuring than you may expect.

You could try gradually increasing your activities and socialising so that you regain your confidence in a step by step approach. Doing this slowly will give you the opportunity to adapt back into the lifestyle you had before treatment.

There are ways of making yourself feel better about your looks for both men and women. You could try www.mynewhair.org, or www.lookgoodfeelbetter.co.uk, both have lots of information that you may find useful.

It is important to acknowledge this time in your life, so you can move on.

Leukaemia Care offers nationwide support groups for people affected by a diagnosis of a blood cancer. Visit www.leukaemiacare.org.uk, or call **08088 010 444**, to find out more and to find a group near you.

Hope

We have concentrated on the

more difficult emotions but you may also be feeling relief that the treatment has been completed and that you can begin to enjoy life again. Coming through treatment brings with it hope for the future. It is often a time when people think about what is most important to them in life and this may result in making changes for the better.

The lighter side of living with cancer

"A cancer diagnosis is not something anyone welcomes into their lives. Firstly, there is the devastation and anger or bewilderment, then the aftermath and knock-on consequences. However, at some point, your focus and outlook could change to become more meaningful and positive than before.

So, what is the lighter side of living with cancer? Well it is all a matter of perspective. You see, I never really lost anything of value; I still had my children, my fiancé, family and friends. I still had a roof over my head, just not the one I had imagined I would have.

I was still alive, just not how I had

imagined I would be. I still had a purpose, just not anything great or grand as I had imagined myself to have. I still had me, and I was able to get in touch with myself without all the other stuff getting in the way.

When I think of the stress I was under before my diagnosis due to my lifestyle, I am not surprised I got ill. My illness was a wakeup call. I am blessed to have been given the opportunity to slow my life down and experience the moment. I now choose who to spend my time around and I ensure the time I spend is of quality. I am no longer striving towards any goals. I have let go of the need for success, and I see it as having little value in life. My children are reminded daily that it is more important that they are nice people than smart people. I experience the moment in a variety of ways throughout each day, which is simply called being mindful.

I try my very best to experience the moment. If after getting dressed mindfully, I am driving somewhere or walking somewhere, I do so mindfully, actively dropping into the body and experiencing how it feels to be here, in the body, at this moment. Sounds help to ground you in the moment,

Effects on your emotions (cont.)

whether they are the sounds of your own footsteps, or of other vehicles on the road. Your breathing is also key to this lifestyle. Until recently, I had walked and driven almost everywhere on autopilot, entirely consumed by thoughts, being somewhere else in my head. Being and becoming mindful in your everyday life is so transformative, it is like living in a new world, with a new you. My most cherished mindful part of the day is preparing and cooking dinner.

The stimulus from the ingredients; the aromas, the feel, the noise as you cut through them, and such like, are all entirely pleasurable. It is a wonderful thing to be present with your meal preparations, and not busy in your head thinking about something that doesn't actually exist at that moment. The joy of mindful cooking is something I look forward to each day, and I appreciate every moment of it. I am living with an attitude of gratitude for all I experience in a day. I speak mindfully with my loved ones and I listen to them carefully, which enables me to have more enriched relationships with them. I try not to react to things which would previously have annoyed me or made me anxious, and when

I am unsuccessful in doing this (as I often am), I sit with the feelings and acknowledge them, allowing the drama which is formulating in my thoughts to dissipate and dissolve naturally.

I am still living with an incurable cancer. I have just finished two and a half years of treatment. I by no means mean to down-play the devastating effects of cancer, but I have accepted it and learnt to welcome it into my life. In doing so, I am no longer at war with it, so it no longer gets my attention. Energy follows focus, and so if I am focusing on the little pleasurable moments of life and living them mindfully, I am focusing on something positive and not the cancer. I am free from the shackles of cancer. Acceptance is the way forward. Accept it and then let it go. Devote your energy to the moment and the genuine experiences which exist therein.

I am happily living with cancer and I am thankful for the changes it has brought into my life. Remember these two things; energy follows focus, and you are not your thoughts - you do not have to attach to them. My life has transformed so much, that I am ready

and willing to say that my cancer diagnosis has been a real gift."

Trish McQueen

Moving forward

Each person finds their own way of adjusting and coping. Being able to talk about difficult emotions, as hard as it is, makes these feelings seem more manageable. We may be tempted to try and protect others from our negative thoughts and feelings but the energy it takes to stifle such emotions can make coping feel much more difficult. Talking openly about your sadness and fears can then free up energy for a more hopeful outlook.

You may find sharing your experiences on helplines, at support groups or local cancer centres a useful way of moving forward.

It can be helpful to talk through your experiences in confidence with someone who is impartial and experienced in helping people 'work through' their cancer. This is not a sign of weakness but a brave and positive step in your recovery process. Your medical

team or local cancer support centre may help you to find a counsellor.

Leukaemia Care has support groups based all around the UK. Call us on **08088 010 444**, or visit **www.leukaemiacare.org.uk** for more information and to find a group near you.

Effects on your relationships

With thanks to Linda Boyne, Haematology Counsellor.

Re-adjusting back into a normal lifestyle after treatment can have profound effects on your relationships. Your relationships may have changed whilst you were being treated; perhaps your partner took on a carer role, or maybe your children didn't spend the time with you that they did before your diagnosis.

It is important to give yourself time to consider your relationships, and work at rebuilding them. This will not happen overnight, and will not be an immediate consequence of coming off treatment. It may require some work, and cooperation on your part, and the part of those around you.

Your partner

You may feel very isolated from your partner and even 'adrift'. They might feel guilty about not contributing as much as they did before your diagnosis.

Often closeness could be missing from a relationship due to a number of factors. You could

feel very tired and drained, and intimacy can be one of the first things to go in a relationship, leaving both of you confused and scared. Your partner may fear hurting you by passing on infections. This can be a lonely place for both you and your partner.

You may feel unattractive due to hair loss, changes in skin and weight reduction or gain. Patients have been known to say things like... "I feel like an old woman and I'm only 34. Will I get my looks back?". This could be a real fear for your partner as well.

It is likely your partner may be feeling a lot of things that you are feeling, but may be unable to voice these concerns for fear of upsetting you, or seeming ungrateful for their own health.

If only one of you can work there may be a strain on the family resources. Socialising and holidays may not be taken due to the treatment, and fear of picking up infections, so couples do not

get a break from the routine to go away together. You may have also spent a lot of time at hospital, which can interfere with the smooth running of family life.

Even though you might not spend as much time together as you would like, it is important to still try and factor in some quality time together. Maybe you could organise a 'date night' and spend the evening together in front of the television.

It might help if you could ask a trusted person to look after your children so you have some alone time. Remember, you don't have to have lots of time and money to spend some quality time together, and this can help you rebuild your relationship.

It might help for you to communicate with each other; though this may be hard to begin with, it might help alleviate your worries, as well as those of your partner.

If you are struggling with the way you are feeling about your appearance, there are ways to make yourself feel better. You could try www.mynewhair.org or

www.lookgoodfeelbetter.co.uk

Your children

This could be one of the most emotive subjects for you. You may feel desperate around your children. You may feel guilty because you may not be able to fulfil the role you usually play in taking care of your children. You could be frightened of dying and leaving your children on their own without their mother/father.

Your children's lives have changed because one of their main carers is ill. Your children may feel scared of losing their mum or dad. They may even feel affected by the changes that might happen to you, such as hair loss, weight gain/loss or perhaps if you have no energy to do anything. This can be scary for children and unsettling. They may as a result be frightened of making any demands, and can feel that they are to blame for you becoming ill.

Some children may 'back off' from you because of their fears of catching the disease, or lack of understanding. They may start 'acting out' because of fears of other children in school finding

Effects on your relationships (cont.)

out and treating them differently.

It may be best to involve your children in as many aspects as possible of your illness and treatment, especially bodily changes and side effects. This may stop any major surprises.

You may want to inform your child's school so they are aware of the situation at home and can offer the child additional support at school.

You might want to consider planning some small activities to do with your children, so that there is some sense of normality in their lives, and a reminder of life before your diagnosis. This may be really small things like ordering in a takeaway, going to the park for an afternoon or doing some arts and crafts in the house. Only do as much as you feel up to, and don't push yourself. This way, you will have the energy and enthusiasm to share with your children.

Your friends

A number of things can happen with friends. Some will be hugely

If you need more support when talking to children, call us on **08088 010 444** and we will be able to signpost you to the correct organisation to support your needs.

supportive. They will keep in touch, visit you in hospital, help out with the kids, cook your meals, babysit, give you lifts to the hospital, be a really supportive listening ear; a general all-round good egg.

They may, however, back off, disappear, not get in touch, and feel like you have enough on your plate without them crowding you. Your friends can also feel confused and scared of catching the disease. It never ceases to amaze the number of people who ask if leukaemia, lymphoma or myeloma is contagious.

Trying to maintain a friendship during the long and at times

difficult treatment pathway can place a burden on you and them. There are going to be times for whatever reason (infection, tiredness, hospitalisation) when it is not possible to be in touch with your friends.

However, it is very comforting to know that they are thinking of you so do try and explain your treatment plan and any pitfalls. If contact is lost for a period of time, they will know you still value their friendship and plan to resume it as soon as you are physically able to.

Various reasons may prevent you from keeping in contact as much as you may like. You could ask a family member to ring them for you to tell them how you are doing.

For those who may not support you as much as you would like, remember that they may be feeling confused, scared or worried. Do not let this concern you; it is important to concentrate on your own wellbeing, and rest assured that these friends will come back to you when they are

ready.

Don't feel afraid of asking your friends to do those things that you can't. They probably feel like they want to help you but don't know how, and by asking them to do practical things you will be able to maintain your friendship and help your own situation.

If you find yourself losing contact with friends, don't let this worry you. They will understand that you have your health to think about. Giving them, and yourself, some time will allow your friendship to naturally reform.

If a family member of friend was your carer you may find that they also need support. We have a booklet called *Caring for Carers*, which you can order by visiting www.leukaemiacare.org.uk or call **08088 010 444**.

Effects on your relationships (cont.)

New relationships

Forming new relationships can be difficult, as they may not have been around through your diagnosis or even your treatment. It may be difficult to know when to tell a new partner about your diagnosis, as you may be worried about frightening them or complicating your situation. The best policy in this situation is honesty, as new relationships demand time and commitment to maintain them.

In simple terms, explain what is happening or has happened, and that you have received treatment but your diagnosis can still affect your life. You may want to share how your treatment has emotionally affected you; if not, try and share how it has practically affected your life, maybe due to hospital visits. Do try and share as much as you can as this will help your new partner understand the situation you are in.

You shouldn't put limits on your life. If your new partner is not happy being with you when they

are told what is happening, it might be that they are not the right person for you. Try not to let this bother you, as you will find somebody who does not let your diagnosis affect your new relationship. It can be very sad and depressing if a new relationship doesn't continue due to your disease. Do talk to people and let yourself feel sad, as this is perfectly normal.

Your relationship may flourish; embrace this, and continue to share how you are feeling.

Try to share as much as you can with your new partner, but do not rush yourself. Perhaps you could explain that you want to tell them about your experiences, but need time to do this. If the relationship has potential to flourish, they will understand your need to take things slowly.

Don't feel rushed to develop new relationships with people; you may need time after treatment to adjust, and developing a new relationship may be too much for you. It is important you feel comfortable before you think



Effects on your lifestyle

With thanks to Amanda Bland, Teenage and Young Adults (Cancer) Clinical Nurse Specialist; Anne Crook, Counsellor at the Christie NHS Foundation Trust; Joanna Injore, Macmillan Haemato-oncology Dietitian (British Dietician Association member); Nick Trott, Haemato-oncology Dietitian (British Dietician Association member); Elizabeth Tydeman, Nutrition Advice Team at Public Health England; and Andy Burman, Chief Executive of the Association of UK Dieticians.

Recovery and adjustment after cancer treatment can have profound implications on your lifestyle. This may result in some changes that you may have to make to allow your lifestyle to mold around your abilities as a patient coming out of treatment. We have included some areas that you may wish to consider, including diet, exercise, the implications of fatigue, smoking, drinking and others. Some of what we cover may be right for you, and some may not. It is important you act on those that work for you as an individual, and remember that changing your lifestyle to suit you is perfectly normal.

Fatigue

Fatigue is a side effect reported by a high number of blood cancer patients. It can be debilitating and unlike 'normal' tiredness, it is not relieved by rest. The impact of fatigue on your everyday life can be far reaching and you may sometimes struggle to do some things you used to take for granted.

You may feel 'as weak as a kitten'. Muscles can feel heavy, and you may feel washed out or even lifeless. Maybe the simplest tasks you attempt to achieve feel monumental, or you may experience mental fog or decreased concentration.

This can be referred to as 'chemo

brain'. Fatigue can last well after treatment has finished. Many patients may not report fatigue to their medical team because they assume it is natural, and something they must deal with. However, there are things that can be done to manage fatigue and the effect it has on your lifestyle.

It is important you inform your medical team of how fatigue is affecting you, so they can produce a management plan with you. You may find it useful to keep a fatigue diary, where you can record your daily energy levels. This is a useful way to identify any particular triggers. This may help you plan your activities and tasks. From keeping records, a number of issues may be addressed to help manage your fatigue.

A well-balanced diet that is high in protein (milk, meat, cheese) with carbohydrates and plenty of fresh vegetables and fruit can help with energy levels. Foods such as spinach, liver and pulses are rich in iron and may also be beneficial.

There is strong evidence to

suggest that maintaining some exercise during and post treatment can help reduce levels of fatigue. You should gradually build up to this so that you do not overstrain yourself. Your medical team can advise you on the best type of exercise to engage in after treatment, your GP should be able to refer you for a prescriptive exercise programme.

It is important that you get the right amount of good quality sleep. Try to avoid sleeping too much during the day as this will lead to broken, shallow sleep at night. You may find it helpful to get into the habit of rising at the same time each day rather than lying in bed and if you do need to have a nap in the day, using an alarm clock to ensure you do not rest for longer than 20 minute intervals may be useful. Relaxation before bedtime, maybe through listening to relaxation or guided breathing CD's may help for a better night's sleep.

Some find complementary therapies such as aromatherapy massage, meditation or yoga helpful. You must always check

Effects on your lifestyle (cont.)

with your medical team before you begin any complementary therapies, and keep them informed.

It is important to pace yourself and prioritise tasks so that you only have to concentrate on what is important. Plan ahead so that you focus on what needs doing when you have the energy levels to see things through to minimise feelings of frustration. You could prepare meals on the days when you have more energy for instance and freeze for when you are feeling more fatigued. You could also take advantage of a delivery to your door of your grocery shop from the major supermarkets.

Spread tasks out over the week and don't be afraid to ask family and friends to help with tasks. If you feel you need extra help to meet every day needs such as personal hygiene and housework, speak with your medical team who may be able to assist you with external help.

Some find it helpful to meet with others who are going through a similar journey. Talking about your fatigue with others who are

experiencing or have recovered from fatigue will help you to feel you are not alone.

Remember: Fatigue is a very real result of cancer treatment for some. If you are suffering from it, you should talk to your medical team, and it will be taken seriously. Do not expect the fatigue to suddenly be alleviated; it can take many months to build up energy and strength after treatment.

Smoking

If you smoke, giving up the habit is the best thing you can do for your health. Smoking comes with a whole range of health risks, including cancer, circulatory problems and fertility problems. As a cancer patient out of treatment, it is essential that you

consider the steps to stopping smoking, as you are more at risk because of your recent health problems.

For advice on quitting smoking, visit [nhs.uk/smokefree](https://www.nhs.uk/smokefree) or call the NHS Smokefree Hotline on **0800 022 4332**.

Healthy eating and healthy weight

When people have finished their treatment they are often keen to get back to normal life as quickly as possible. A healthy balanced diet can play an important part in keeping you well and helping you recover. Growing evidence suggests that if a healthy diet

is consumed and a healthy weight is maintained with regular physical activity, this can reduce the risk of cancer diagnoses. The style of eating outlined below is suitable for everyone in the general population. However, if you have recently lost weight or your appetite and food intake has been reduced then this requires a different approach - that emphasises higher energy foods and snacks. If this has been true

for you it would be important to discuss this with your hospital doctor and dietitian.

these foods appear particularly helpful in relation to cancer prevention - examples of these foods would include:

- Wholemeal breads
- Brown rice
- Wholemeal chapatti
- Potatoes with skins left on
- Wholemeal pasta
- Whole oats
- Wholemeal couscous
- Quinoa
- Wholegrain breakfast cereals

These foods tend to be naturally low in fat and rich in fibre, which is beneficial in two main ways:

1. Helps digestion and prevents constipation.
2. Absorb water in the bowel and help us to feel full for longer.

Including wholegrain cereals and starchy foods with each meal is a great way to help you manage and control your weight, which has been shown to reduce the overall risk of some cancers.

Fruit and vegetables

These foods provide a range of important nutrients including many of the antioxidant vitamins and other substances called phytochemicals that can help protect you from cardiovascular disease and cancer. The soluble fibre available from these foods can also reduce your cholesterol, further protecting your heart health.

Variety is the key with this group. Fresh, frozen, tinned, dried and canned as well as juices and smoothies (150ml maximum per day) all count.

A portion is about 80g or 3oz, examples include:

- 1 banana /1 apple
- About 10 grapes / 6 strawberries
- 2 plums
- 3 tablespoons of vegetables
- 1 cereal bowl of salad
- 1 small glass of fruit juice (150mls)*
- 3 heaped tablespoons of pulses* (e.g. baked beans or

Effects on your lifestyle (cont.)

lentils)

***only count once a day each**

The vitamins and phytochemicals in fruits and vegetables protect the cells in the body from damage and research shows that is why increasing your intake of these can help to protect you against cancer.

Also they contain good amounts of fibre and water, they are low in calories and can help to fill you up which can be helpful in controlling your weight.

Dairy and alternatives

Dairy foods such as milk, cheese and yoghurt are excellent sources of protein, which is vital for many of the body's functions particularly growth and repair. They are also rich in calcium, which is essential throughout life to keep bones healthy and strong.

Although dairy foods can contribute to a healthy diet, they may also be high in saturated fat and salt - two nutrients of which it is helpful to reduce your intake. This is because research has shown over consumption of salt

and saturated fat may contribute to our risk of developing certain cancers.

Examples of lower fat dairy foods would include:

- Reduced fat hard cheeses
- Semi skimmed milk / 1% milk / skimmed milk
- Cottage cheese
- Low fat or virtually fat free yoghurts

Beans, pulses, fish, eggs, meat and other proteins

These foods are also important sources of protein, and meats can contribute to your intake of minerals like iron and vitamins such as B12. However, recommendations from research suggest it is helpful to limit your consumption of red meats (beef, lamb and pork) and processed meats like sausages, bacon, ham, salami and pâtés. Try to eat no more than 70g (or 2.5oz) per day to help lower the risk of some cancers.

Choose More:

Fish – it is recommended to have two portions of fish per week (2 x 140g), with one being an oily fish

Lean poultry

Pulses (e.g. reduced sugar and salt baked beans, chickpeas/haricot beans/kidney beans/butter beans in water; avoid those sold in salted water)

Vegetarian meat alternatives (e.g. Quorn, Tofu)

In terms of cooking, research suggests that meat cooked at high temperatures – fried or barbecued, for example – may also increase the risk of developing some cancers.

Oils and spreads

All fats are high in calories (1g = 9 kcal) and should be eaten in moderation. Saturated fat can also raise your cholesterol levels and increase your risk of heart disease and therefore it is best to limit your intake.

Unsaturated fats are healthier fats that are usually from plant sources and in liquid form as oil, for example vegetable oil, rapeseed oil and olive oil. Swapping to unsaturated fats will help to reduce cholesterol in the blood, therefore it is important to get most of our fat from unsaturated oils. Choosing lower fat spreads, as opposed to butter, is a good way to reduce your saturated fat intake.

Foods to eat less often and in small amounts

You do need some fat and sugar in your diet but foods that are rich in them are classed as being energy dense. This means they contain a lot of calories in a small volume. These foods are not needed in your diet so it is important to try and limit their consumption. It is

Effects on your lifestyle (cont.)

easy to eat more than your calorie requirements and potentially become overweight. Particularly if you gain weight around the stomach area, this can increase your risk of cancer (see the Body Mass Index chart to work out if your current weight is within the health range).

Ways to reduce the fat in your diet:

- Eat low fat dairy products - reduced fat cheese/1% fat and semi skimmed milk.
- Lean cuts of meat - trim visible fat and remove the skin from chicken.
- Limit butter, spreads, mayonnaise and measure cooking oil when used.
- Bake, grill, stir fry, microwave and steam food rather than deep fry.
- Read labels. Where colour coded labels are used you can tell at a glance if they are high, medium or low in sugar and saturated fat. For a healthier choice, try to pick products with more green and ambers and fewer reds.

Sugar

Avoiding added sugar can also help prevent weight gain. Foods to try and limit include sugary drinks, cakes, sweets and biscuits.

Try diet soda, no added sugar squashes, snack on fruit and vegetables and avoid adding sugar and syrups to tea and coffee.

Look and learn from labels.

	Fat	Saturates	Sugar	Salt
High	Over 20g	Over 5g	Over 15g	Over 1.5g
Medium	Between 3g and 20g	Between 15g and 5g	Between 5g and 15g	Between 0.3g and 1.5g
High	Below 3g	Below 1.5g	Below 5g	Below 0.3g

Adapted from FSA information

Salt

Although there is limiting evidence to suggest the impact of salt on cancer diagnosis, general intake of salt should not exceed 6g a day. This will reduce the risk

of stroke and hypertension (high blood pressure).

What about alcohol?

Research has shown alcohol is linked to the development of certain cancers. Alcohol also contains lots of calories (energy) so consuming large amounts will contribute to weight gain.

Alcohol is measured in units. In the UK, one unit of alcohol is 10ml (8g) of pure alcohol. The table below gives you examples of the units of some common alcoholic drinks.

Unit of alcohol	Drink
1 unit	Half pint lower strength (3-4%) beer, lager or cider or a single measure (25ml) 40% spirits
1.5 units	Half pint strength (5%) beer, lager or cider or 1 bottle (275ml alcopop)
2.1 units	Standard glass of wine (175ml) also called a small glass in pubs and bars
3 units	Large glass wine (250ml)

The NHS and UK Government recommend that you do not exceed the following:

- **Men:** 3-4 units a day
- **Women:** 2-3 units a day

It is also a good idea to have one or two alcohol free days every week.

Maintaining a healthy weight

It is important to stay a healthy weight*. If you are overweight or obese it can lead to many health problems such as high blood pressure, heart disease and diabetes. There is also increasing evidence that being overweight increases your risk of certain cancers (for example bowel, kidney, pancreas, oesophagus, womb and breast cancer in post-menopausal women).

You can check if you are the right weight for your height by calculating your body mass index (BMI). BMI is a measure of weight in relation to height which can vary depending on natural variations in body shape. Additionally, BMI can be influenced by other factors including the amount of muscle

Effects on your lifestyle (cont.)

you possess, ethnicity and pregnancy.

Speak to your doctor if you are concerned about your weight, and any weight gain or loss. We should all aim to be in the healthy weight category, which is a BMI of 18.5 – 24.9kg/m² as per NICE guidelines.

Tips to maintain a healthy weight

- Be realistic about your weight loss; only aim to lose about 0.5-1kg (1-2lbs) a week.
- Try to eat a balanced diet as shown in the eat well model; The Eatwell Guide.
- Try to avoid food high in calories such as fried foods, take-away meals and sweets and cakes as well as biscuits, crisps, butter, fizzy drinks, ice cream and sauces such as mayonnaise and chocolate spreads.
- Try to reduce your portion sizes; try using a smaller plate and avoid going up for seconds.
- Fill up on salads, vegetables and wholemeal products.
- Increase your activity level. Try

to incorporate activity into your

- daily life for example, take the stairs wherever possible, walk more rather than using the bus or car. Aim to build up your activity level to 75 minutes of vigorous intensity per week or 150 minutes of moderate intensity per week, maybe think about starting a new activity such as swimming or dancing.
- Try to limit the consumption of foods in high fat, salt and sugar by having them less often and in smaller amounts. These foods and drinks contain lots of energy, particularly when you have large servings. Check the labels.

Common diet and cancer myths

Nutrition is a hot topic in the news. There always appears to be a new diet or "superfood" in the press that we should be avoiding or eating. This next section looks at some of the common diets/foods that you may hear about.

Low sugar diets:

- There is no evidence that sugar

increases the risk of cancer or encourages cancer cells to grow. However, too much sugar does increase risk of weight gain and, in turn, the risk of some cancers.

- Sugar provides "empty calories" so it would be helpful to reduce your intake as it doesn't contain any other beneficial nutrients apart from energy, which you could get from other sources.

Dairy-free diets:

- Research studies have looked into dairy intake and the occurrence of cancer but they have not found a clear link. We therefore do not recommend following a dairy-free diet to reduce the risk of cancer.
- Remember dairy products are an important source of calcium so try to include some dairy products or alternatives in your diet.

Dietary supplements:

- If you follow a healthy balanced diet it should supply all the vitamins and minerals you need. Very high doses of any vitamin/mineral are not

recommended and can be harmful.

- If you are finding it difficult to follow a balanced diet you may benefit from a general multivitamin and mineral supplement but check it only contains up to the 100% of the recommended daily allowance. Remember, always inform your medical team if you are taking any supplements!

Cognitive effects

Patients who have had certain types of treatment often describe an invisible side effect called 'chemo brain'. You may notice that you sometimes have trouble with finding words, remembering details, concentrating on a task or you may take longer to finish things. More research is needed into the causes of 'chemo brain', but it is known that the brain usually recovers over time. In the meantime, you may find that it has an impact on your daily life, reduces your self-confidence and may be distressing.

Effects on your lifestyle (cont.)

It may help you to try some of the following:

- Write down details. This can help you retain information over time.
- Use a daily planner and make 'to do' lists, so you know what you need to remember is noted down.
- Break up any concentration tasks with physical exercise and get enough rest.
- Tell your friends and family about how you feel, and they may have further ideas to help you manage. You will also feel less isolated if others know.
- Talk to your medical team so they can check for other possible causes such as blood counts, hormone changes or medication effects.



Effects on practical issues

With thanks to Dr Ziv Amir, Honorary Professor, Cancer Rehabilitation, Salford University, Greater Manchester and Dobrin Neykov, Partnership Operations Executive, Money Advice Service.

Many people find that cancer has an impact on some of the practical aspects of their lives. This may be because you have been unable to work for some time, and maybe your partner has had to take time out of work to care for you. Recovering from a financially difficult situation can be a challenging and complicated process.

Work and employment

This section contains brief information and advice about your employment and financial issues.

It may be important to know that under the Equality Act (2010), you automatically meet the disability definition from the day you are diagnosed with cancer.

Information about work and cancer

The problem

Cancer treatment may cause

some side effects. Some of them last for the short term and some could last for a longer period of time. Tiredness and weakness (fatigue) is the most common long-term problem reported by people affected by cancer. This problem affects everyone differently, with some people reporting a strong effect on their ability to work.

These conditions can affect the way you may perform, and your ability to concentrate on anything. Furthermore, these side effects can have an impact on your relationships with your employer/manager and/or colleagues.

Advice

You can:

- Consider taking time off, either as one period of sick leave, or a few days every month for a period of time. Make sure to ask your GP for a Statement of Fitness to work (Fit note), and to

check with your employer your eligibility to receive Statutory Sick Pay (see section C).

- Talk to your manager and/or colleagues about deadlines and which tasks are more important and how you can manage them.
- Talk to your employer about the possibility of changing your duties if necessary.
- If you have occupational health advisors, talk to them. They might be able to help you.
- Check with your employer/ manager whether there is a home-working policy at your organisation, and how this is suitable to your situation.
- Plan a period of rest after activity, especially following your meal.

Your manager may be able:

- To change your hours to make it suitable for your special situation.
- To allow you to take short breaks to rest.
- To allow you to work from home,

if possible.

- To find you less strenuous work if your job involves physical activity or heavy lifting.
- To ask your colleagues to help with some of your work.

The problem

Talking about the illness can be very difficult and worrying. You may worry about how your colleagues will react to this information. It is fairly common that some people might choose to avoid you after your cancer diagnosis. This could be because they are not sure what they should say and are afraid of saying the wrong thing.

Advice

You can help them by opening up conversations about the illness and showing that you are willing to talk about your cancer.

However, for some people, a good way of coping is by not talking about their cancer.

You should be aware that your colleagues might realise from your behaviour that something is

Effects on practical issues (cont.)

wrong, and may feel awkward if they don't know what it is.

Generally, in case you are unable to discuss your situation with your employer/manager you can always seek external advice, such as by contacting the Macmillan Support Line on **0808 8080000**, or alternatively contact your Trade Union representative.

Looking for work

If you are looking for a new job, you might be reluctant to tell prospective employers about your cancer diagnosis.

You should be aware that under the Equality Act (2010), it is illegal for employers to ask questions about a candidate's health condition during the recruitment process.

However, it is acceptable to obtain information about the candidate's medical circumstances when the job has been offered. If the job offer was withdrawn on the basis of this information, the employer will need to make sure that the reason for that is not discriminatory.

These questions should be used to ascertain your ability to carry out the job BUT not to discriminate against you.

Nevertheless, it is acceptable to gather information about your health only for monitoring the recruitment process and for confirming that the applicant will be able to do the job.

Financial issues

Financial issues can cause worry when someone becomes ill. Many people affected by cancer report some financial implications as a result of being diagnosed with cancer.

Statutory support

Statutory Sick Pay:

Everybody who pays national insurance contributions is eligible to receive Statutory Sick Pay. This should be paid by the employer for up to 28 weeks of sickness. It starts when the employee has been off work for four days and continues until a maximum of 28 weeks. By the end of this period, the employer should provide you with a form (SSP1), which explains

that the Statutory Sick Pay is finishing and where to get further help and advice about benefits.

Following a full (28 weeks) period of absence, you need to be back at work for over 8 weeks before claiming again for the full Statutory Sick Pay.

You should inform your employer about your illness no later than 7 days after you become ill.

You may be entitled to occupational or company sick pay on top of the Statutory Sick Pay. This should be stated in your employment contract. If in doubt, you should contact your Human Resources Department.

Benefits

Information about the most relevant benefits are provided in this section. However, due to the significant changes introduced to the UK benefits system, it is strongly recommended to get help from an experienced welfare rights adviser. To speak to one, you can call the Macmillan Support Line (Tel: **0808 8080000**), or your local Citizens Advice Bureau. You can also get

a pack from your local Jobcentre or visit www.gov.uk/browse/disabilities

Employment and Support Allowance (ESA)

This benefit provides financial help to people who are unable to work following completion of the Statutory Sick Pay period (28 weeks). You may also be eligible if you can't claim SSP because you're self-employed, unemployed but not in receipt of Jobseeker's allowance, you earn less than the National Insurance contribution threshold or are under State Pension age. ESA also provides personalised support to those who are able to work.

There are two different types of ESA, each with different eligibility criteria:

- 1. Contribution-based ESA** – you may be able to claim this if you have paid enough National Insurance contributions. This is not means tested and is not affected by your partner's income or savings or how many hours they work.
- 2. Income-related ESA** – you

Effects on practical issues (cont.)

may be able to claim if you earn less than £112 a week and haven't paid enough National Insurance contributions. Income-related ESA is means tested so if you or your partner have income or savings of £16,000 or work 24 hours or more a week then you may not be eligible.

For 13 weeks after your claim you will receive the assessment rate and, if you are entitled to ESA, you will be placed in either the work-related activity group (up to £102.15 a week) or the support group (up to £109.30).

Disability Living Allowance (DLA)

This benefit provides financial support for people under 65, who have had difficulty walking or taking care of themselves for at least 3 months. These difficulties should be expected to last for at least the next 6 months. From April 2013, a new claim for Disability Living Allowance can only be made for children under 16.

Personal Independence Allowance (PIP)

This benefit has replaced Disability Living Allowance for adults. It provides financial help to people between 16 and 64 who have found it difficult to get about day-to-day for at least three months. These difficulties should be expected to last for at least the next nine months. This benefit is not means tested, so you could be in receipt of this benefit regardless of your income or savings.

If you have been turned down for a benefit you may be able to appeal against that decision or ask for a review. This should be done within a certain time frame. This is a complicated process, so it is advisable to seek help from the above mentioned sources.

Financial products

Some people have got financial products to cover them for a "rainy day". Schemes like life assurance, critical illness and occupational pension. Since each of these schemes have different rules and operate in different

ways, it is extremely important to get proper advice to find out about these policies and the best thing to do in your current situation.

For example, if there is an urgent need for money, it might be possible to take out a loan against the life insurance policy, sell it or surrender the policy. Each of these actions has significant

implications on your future financial situation, so, prior to making any rushed decision, it would be useful to get advice.

There are a few sources of advice:

- For a particular financial product; the provider of the product (insurance company, pensions scheme, etc.).
- For advice about investment; an independent financial advisor (IFA).
- For debt advice; independent, free organisations, such as Citizen Advice.
- The Macmillan Cancer Support Line (Tel: **0808 8080000**).

Being diagnosed with cancer

might impact the conditions of buying insurance. Sometimes, people affected by cancer face higher premiums, special conditions or refusal when buying life insurance and some types of health insurance, such as travel insurance.

Since cancer is now considered as a disability under the Equality Act 2010, an insurer can treat a client with a disability less favourably

if the disability increases the risk of claiming, but only if the assessment is based on relevant information from a source that is reasonable to rely on (statistical data and/or medical reports).

Insurer decisions can be challenged, and then the insurer will have to provide evidence to show that the decision was based on the above mentioned conditions.

Travel insurance

Once you have finished treatment, and have recovered to an extent from your experience of diagnosis and treatment, you may want to turn your attention to going on holiday. Though you have

Effects on practical issues (cont.)

recovered from treatment and are on your journey back to recovery, you should always consider travel insurance as part of your holiday plans.

Insurance is especially important if you are travelling to a country with high medical costs, to places outside of the European Union. As you have had cancer treatment, and are recovering from treatment, you may find it harder to get travel insurance because you are perceived to be more likely to need medical treatment abroad.

If you are planning to travel, it is important you take the time to consider insurance, and the best way to cover yourself should you need any medical treatment abroad. Some insurance providers now operate on a case by case basis instead of declining everyone who has had cancer. You may require a medical certificate to confirm you are fit enough to travel; speak to your medical team about obtaining one of these.

Many providers will only cover you for any treatment you may

need as long as it is unrelated to your cancer, which could end up costing you. You will need a policy that clearly states that you will be covered should you need treatment related to your cancer. As long as you have made the insurance provider aware of your history with cancer, they know that it is possible you may need treatment because of it, and they must pay according to the policy agreement. Due to this it is important that you know what is covered in your policy.

When you first begin looking for insurance providers for quotes, be mindful that it will depend on the type of cancer you have had. Be prepared to answer questions about your diagnosis, treatment and prognosis. Be honest with your answers, and be as clear as possible about the treatment you have had, and how long you have been cancer free. If you don't, it will affect the cover you receive should you need treatment whilst you are on holiday. Insurance providers have different policies on those who have had cancer in the past; some companies need you to be cancer free for three

months, some for ten years.

The best thing you can do to ensure you are getting the best deal is to shop around, and make sure you are always clear about what stage you are at with your cancer.

If you would like further help with travel insurance, or a more extensive list of insurance providers, you can call us on **0808 010 444**.

Useful contacts and further support

There are a number of helpful sources to support you during your diagnosis, treatment and beyond, including:

- Your haematologist and healthcare team
- Your family and friends
- Your psychologist (ask your haematologist or CNS for a referral)
- Reliable online sources, such as Leukaemia Care
- Charitable organisations

There are a number of organisations, including ourselves, who provide expert advice and information.

Leukaemia Care

We are a charity dedicated to supporting anyone affected by the diagnosis of any blood cancer. We provide emotional support through a range of support services including a helpline, patient and carer conferences, support group, informative website, one-to-one buddy service and high-quality patient information. We also have a nurse on our help line for any medical queries relating to your diagnosis.

Helpline: **08088 010 444**
www.leukaemiacare.org.uk
care@leukaemiacare.org.uk

Bloodwise

Bloodwise is the leading charity into the research of blood cancers. They offer support to patients, their family and friends through patient services.

020 7504 2200
www.bloodwise.org.uk

Cancer Research UK

Cancer Research UK is a leading charity dedicated to cancer research.

0808 800 4040
www.cancerresearchuk.org

Macmillan

Macmillan provides free practical, medical and financial support for people facing cancer.

0808 808 0000
www.macmillan.org.uk

Maggie's Centres

Maggie's offers free practical, emotional and social support to people with cancer and their families and friends.

0300 123 1801
www.maggiescentres.org

Citizens Advice Bureau (CAB)

Offers advice on benefits and financial assistance.

08444 111 444
www.adviceguide.org.uk

NHS Choices

Aims to help you make healthier lifestyle choices.

www.nhs.uk/Livewell/healthy-eating

Keep Fit Association

A national governing body. KFA classes include teaching adults, older adults, children and seated frail elderly.

01403 266000

www.keepfit.org.uk

Change For Life

Change For Life is a government campaign providing tips and plans on getting healthy in all areas of lifestyle.

www.nhs.uk/change4life

Penny Brohn Centre

The 'Living Well' course can help you to find your own way of living well with the impact of cancer.

0845 123 2310

helpline@pennybrohn.org www.pennybrohncancercare.org

British Association for Counselling & Psychotherapy

Counselling and psychotherapy are umbrella terms that cover a range of talking therapies. They are delivered by trained practitioners who work with

people over a short or long term period to help them bring about effective change or enhance their wellbeing.

01455 883300

Leukaemia Care is a national charity dedicated to providing information, advice and support to anyone affected by a blood cancer.

Around 34,000 new cases of blood cancer are diagnosed in the UK each year. We are here to support you, whether you're a patient, carer or family member.

Want to talk?

Helpline: **08088 010 444**

(free from landlines and all major mobile networks)

Office Line: **01905 755977**

www.leukaemiacare.org.uk

support@leukaemiacare.org.uk

Leukaemia Care,
One Birch Court,
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Registered charity
259483 and SC039207

Leukaemia Care
YOUR Blood Cancer Charity

