

Breast Cancer Support Group Sussex



Dates For Your Diary

Hello Ladies

Hope everyone is well and enjoying the lovely weather we have been having.

For those of you that couldn't make our May meeting missed a really good meeting where we were lucky enough to have Dr Richard Simcock with us. Everybody is still talking about the meeting and how informative Richard was. He told us all about the latest treatments and trials that are going on at present. He also told us that Gary Rubins, Radiologist, who has previously been a speaker at our meetings, has now retired. We all wish Gary well on his retirement. We would like to thank Richard for giving up his evening to come especially after a long working day.

Our June meeting on the **19th June**, we have two specialised nurses from the Queen Victoria Hospital in East Grinstead coming to talk to our group. Rebecca and Pam who work alongside all the Breast Plastic Surgeons are giving up their time to come and talk to the group about all what's on offer in the reconstruction world at the Queen Vic. I'm sure that it will be an interesting talk and especially helpful to our members who are contemplating reconstruction. I'm hoping that we get a good turn out!

Pink Stall : June 17th at Blakers Park. Yes ladies, the Pink Stall at Blakers Park is happening once again on June 17th, two days before our next meeting so if you have any Pink things for the stall please call us and we will try and collect from you. We also need helpers either for wrapping on the Thursday evening 15th June or to help on the stall for an hour or two on the day. Please let us know. The number to call is 07557 685483. Remember what we raise goes to help our group.

We have other activities coming up later in the year and we will put these in the next newsletter.

See you all at Blakers Park and at the next Group meeting.

Kind regards

Joyce

June 17

Pink Stall at Blakers Park

June 19

Our Monthly Group Meeting with speakers Pam Gatton and Rebecca Spencer, Breast Cancer Nurses from Queen Victoria Hospital (see page 2)

July 17

Our Monthly Group Meeting

NEW - Family & Friends **Support Meeting** with **Cancervive** at every Group Meeting

Our Group Meetings are held at the **Macmillan Horizon Centre**, Bristol Gate (opp A&E at the RSCH)
6.30pm to 8.30pm



Breast surgery

QVH is the major regional centre for complex, microvascular breast reconstruction following, or simultaneously with, resection for cancer.

Our integrated team of consultants and specialist breast care nurses provide a wide range of reconstructive options and flexibility and also undertake surgery to correct breast asymmetry and breast shape deformity.

Our Macmillan Breast Reconstruction Nurse Specialists, Pamela Golton and Rebecca Spencer, act as a point of contact for patients, relatives, carers and other healthcare professionals. They provide information and practical and emotional support to patients undergoing breast reconstruction and related breast care.

Clinical effectiveness

The gold standard for breast reconstruction after a mastectomy is a 'free flap' reconstruction using microvascular techniques to take tissue, usually from the abdomen, and use it to form a new breast.

This technique has greater patient satisfaction and longevity but carries greater risks of failure than an implant or pedicled flap reconstruction, so it is important we monitor our success.

Breast reconstruction after mastectomy using free tissue transfer – flap survival

QVH target:	100%
Benchmark:	95–98% (published literature); 98% British Association of Plastic, Reconstructive and Aesthetic Surgeons 2009
2015/16:	99.6%
2014/15:	100%
2013/14:	98.94%
2012/13:	99.44%
2011/12:	99.2%
2010/11:	98.4%

Cancer in the news: how to make sense of the headlines



Stories about cancer and our health appear in newspapers on TV and online every day, but how can you tell if they're accurate? Our top five tips can help you make sense of the headlines.

Have you ever opened a newspaper to be confronted by a headline about the health benefits of a particular food? Or turned on the TV to be told that a certain activity raises your risk of cancer?

Next time you see a health news story that interests – or worries – you grab a cup of tea, sit down and read it with the following questions in mind.

1. Where did the story come from?

Often health stories are based on a piece of scientific research. A well-written news story should tell you who carried out this research and where it was published.

Ideally the study would have appeared in a peer-reviewed journal. ‘Peer review’ means the study report is read by other experts in the field who decide whether it’s suitable for publication.

Appearing in a peer-reviewed journal doesn’t automatically mean a study is of the highest quality. But according to Dr Emma Pennery, Breast Cancer Care’s Clinical Director, ‘If it has appeared in a credible peer-reviewed publication then its quality will have been assessed by other experts.’

It may also be possible to find out who funded the study. This doesn’t necessarily affect how reliable it is. But, for example, a study showing that moderate alcohol consumption can have health benefits may look more credible if it was funded by a cancer research charity than a drinks company.

2. Does the headline reflect the science?

Headlines are written to grab your attention. But you’re unlikely to get much information about a piece of research from the headline alone. So always read on.

If you only read the headline it could be easy to misinterpret a piece of research. For example in 2008 the Daily Express claimed that Scrubbing floors cuts risk of breast cancer. However, the study itself looked at the effects of ‘vigorous physical activity’ and only included floor-scrubbing as one of many examples.

More recently, in 2013 the Independent carried the headline: Breast implants “increase cancer death risk” say scientists. However, reading beyond the headline revealed that breast implants themselves are not thought to increase the risk but rather may make it more difficult for doctors to spot cancers via breast screening.

Dr Pennery also points out that different news sources may focus on different elements of a study. ‘Sometimes you can read four different headlines about the same research and think you’re looking at four completely different stories,’ she says.

3. Was the research in humans?

Early research is often carried out in the laboratory – on cells or tissue or on animals. This can inform future research, such as the development of new drug treatments. However, any conclusions about possible effects in humans should be made with caution.

For example, if a study reported that a chemical found in a type of tea can slow the growth of cancer cells in a laboratory, this doesn’t mean drinking that tea can stop you getting cancer.

And what happens in mice won’t necessarily happen in humans.

4. How big was the study?

If the study was in humans, the next thing to look at is how many people were involved. While size isn't everything, a very large study is more likely to produce reliable results than a very small one.

'If a new treatment is only tested in three people,' says Dr Pennery, 'the results are going to be less credible than if it was tested in 30,000 people. A large study means the results have been replicated many more times.'

It may also be useful to know whether the results of a study support or contradict those of other similar studies. However, news stories don't always report this and it can be difficult to find out.

5. Does the news story talk about risk?

Often news stories report an association between an activity – perhaps eating a certain diet or exercising – and an increased (or decreased) risk of an illness.

This may be expressed as a 'relative risk' increase. Put simply, relative risk compares a risk in two different groups of people.

For example, in 2012 many newspapers reported that an association had been found between eating more processed meat and the risk of pancreatic cancer. The Express had the headline: Daily fry-up boosts cancer risk by 20 per cent. This suggests that people who have a fried breakfast every day have a 20% higher risk of pancreatic cancer than people who don't have a daily fry-up. This is a relative risk.

The problem is that unless you know what your risk of pancreatic cancer is to begin with – which scientists call your 'absolute risk' – the relative risk figure doesn't mean much.

On its own a 20% increase in risk may sound high – and rather scary given the news story describes pancreatic cancer as 'one of the most deadly cancers'. However, it doesn't tell you that the absolute risk of getting pancreatic cancer in your lifetime is pretty low – about 1 in 77 which is less than 1.5%. Therefore even if your risk is increased by 20% the overall risk of getting the cancer is still low.

If a news story reports a relative risk figure, ideally it should also tell you what the absolute risk is.

Where can I find reliable health information?

All the information on Breast Cancer Care's website and in our publications is written by clinical specialists and reviewed by healthcare professionals.

If a newspaper publishes a story about breast cancer that we think needs further explanation we'll often publish a summary in our news section.

The NHS Choices website has a service called Behind the Headlines. Every day it takes two health news stories and analyses the studies behind them.

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Avocado toasts (recipe courtesy of Waitrose)



We think this is the best-ever avocado toast – perfect for lazy Sunday mornings. If the sun is shining, enjoy al fresco.

- Preparation time: 15 minutes
- Cooking time: 5 minutes
- **Total time: 20 minutes**

Serves: 2

Ingredients

1 Waitrose 1 Perfectly Ripe Avocado
Juice of ½ lime
1 salad onion, finely chopped
Large pinch of chilli flakes
1 tsp white wine vinegar
2 medium Waitrose British Blacktail Free Range Eggs
2 slices Waitrose 1 White Sourdough Bread, toasted

Method

1. Coarsely mash the avocado with a fork. Mix in the lime juice, salad onion and chilli flakes. Cover and set aside.
2. Bring a large pan of water to the boil over a high heat and add the vinegar. Crack each egg into a small bowl, then carefully slide into the water. Simmer very gently for 3-4 minutes before removing with a slotted spoon.
3. Meanwhile, spread the mashed avocado over the toast and top each slice with a poached egg. Grind over a little black pepper and serve straight away.

Cook's tip Try adding chopped herbs such as coriander or mint to the avocado mix for an extra burst of flavour.

The V.I.B (Very Independent Brighton) Food Tour

Central Brighton, East Sussex, BN1 1UF



About

Brighton Food Tours' signature food tour - The V.I.B (Very Independent Brighton) Tour - is a celebration of independent Brighton – packed with the eclectic sights and tastes from the unique makers to the unsung heroes of Brighton's indy food & drink scene.

Over the course of approx. 3 hours you'll get a chocolate-box selection of the best foodie hotspots that quirky, independent Brighton has to offer.

Because Brighton has such a blooming independent food-and-drink scene, we are able to swap in and out vendors depending on season, weather and what we think will work on the day you visit.

That helps us to make each V.I.B experience that little bit unique – and means more of

our city's food-and-drink superstars can feature. You might visit off-the-beaten-track street food stalls, hear about eco-aware sustainable food systems, get down and dirty with the most passionate burger-makers in town, meet food industry revolutionaries, re-live the quintessential old-school seaside Brighton... and a whole lot more.

Praise from Brighton Food Tours customers:

"Really excellent. Had a great time – just the right time walking and amount of food!"

"It's local, small & poseur-free. It was real food. A Jay Rainer experience!"

"People so rarely walk around their own cities. Brighton Food Tours helps people to re-discover and feel closer to the place they live"

For more rave reviews, check out Brighton Food Tours' 100% 5-star ratings on TripAdvisor

Guide Prices

From £35 per person including all food/drink tastings + exclusive discounts

Fridays and Saturdays 11am to 3pm from 2nd June to 28th October

For more information:



+44 (0)7985 230955

<http://brightonfoodtours.com/>

Vaginal dryness: why it happens and how to treat it



Vaginal dryness is a very common side effect of some breast cancer treatments. We explore some practical things that can help.

Breast Cancer Care get lots of calls to our Helpline about vaginal dryness. But it can be a difficult subject to bring up.

'It is embarrassing so it is not talked about,' says Debby Holloway, nurse consultant in gynaecology. But, she says, women should be able to have an open conversation about it with their healthcare professional.

Vaginal dryness won't get better on its own, so seeking help to manage it is important.

All about oestrogen

'Vaginal dryness happens due to a lack of oestrogen,' explains Debby.

Some breast cancer treatments block or reduce the amount of the hormone in your body. Because oestrogen helps maintain the vagina's moisture and elasticity, a lack of it can cause the vagina to become dry and less supple, and may make sex or intimacy painful.

If it's not treated it can get worse, and may lead to loss of sex drive and emotional problems alongside the physical ones.

'If it hurts when you have sex,' says Debby, 'this can lead to not wanting to have sex as there is a fear it can hurt. This circle is difficult to break.'

Ways to help dryness

'There are many different products that can be used for vaginal dryness,' says Debby, 'and some of them are available on prescription or can be bought from a chemist or online.'

While you might want to try some of the products mentioned below, talk to your specialist team too. Vaginal dryness and irritation can also be caused by an infection, so it's a good idea to see your GP to rule this out.

1. Try moisturisers or lubricants

Vaginal moisturisers – such as ReplensMD, Senselle or Hyalofemme – provide long-term relief for dryness and discomfort, and are not just for use during sex. You can use most types every few days, and they're most effective when used regularly over time.

Moisturisers are usually applied with a pessary (a small, soluble block that dissolves in the vagina) or tampon-style applicator.

Vaginal lubricants are shorter acting than moisturisers, and only provide temporary relief. They're intended to help prevent friction and pain during sex and intimacy, and work best if used by both you and your partner. Lubricants are available as a pessary or a tube of liquid or gel. You could try Yes, Pasante TLC or Sylk.

It's worth trying different brands – you might prefer some to others – and you can use lubricants and moisturisers alongside each other. But don't be tempted to substitute moisturisers or lubricants with Vaseline, hand cream or body lotion.

2. Ask about oestrogen products

The most commonly used treatment for vaginal dryness is hormone replacement therapy (HRT), but this is not usually recommended for women after a diagnosis of breast cancer.

However, some specialists may prescribe a topical hormone treatment, which is applied directly to the area, to help reduce dryness and discomfort. This could be an oestrogen pessary, vaginal tablet or cream.

When you use vaginal oestrogens, it's thought that very small amounts of the hormone are absorbed into the body. Therefore, vaginal oestrogen may be more safely prescribed for women taking tamoxifen, because tamoxifen is thought to counteract any oestrogen entering the bloodstream.

If you're taking an aromatase inhibitor – such as letrozole, anastrozole or exemestane – vaginal oestrogen is not usually recommended. But it might be worth asking your specialist team if switching to tamoxifen is an option.

3. Intercourse can help

If it's comfortable for you, sexual intercourse can stimulate blood flow to the vagina and help maintain its suppleness and elasticity. Using a vibrator or masturbating can also help in the same way.

4. Exercise your pelvic floor

Doing regular pelvic floor exercises can increase blood flow and relax your pelvic muscles. Knowing how to relax these muscles can help ease pain during sex or intimacy, and also help you feel more relaxed during procedures such as a smear test.

You can feel your pelvic floor muscles if you try to stop the flow of urine when you go to the toilet (but don't do this often because it can be harmful to the bladder).

To strengthen your pelvic floor, sit comfortably and squeeze these muscles 10 to 15 times in a row. Don't hold your breath or tighten your stomach, buttock or thigh muscles at the same time. When you get used to doing this regularly, you can try holding each squeeze for a few seconds. Every week, add more squeezes, and rest the muscles between sets.

Six other things that might help

- If penetrative sex is too painful, consider other forms of intimacy.
- Keep lubricants near the bed so you don't have to get up to find them.
- Don't use scented soaps, lotions, bath oils or panty liners as these can dry out the vaginal area.
- Try switching to a different washing powder or fabric conditioner, as some can irritate the area.
- If you smoke, try to cut down or give up completely.
- If you need to have a smear test and are experiencing vaginal dryness, tell the nurse or doctor beforehand so they're aware.

Find out more about sex and intimacy after breast cancer.

<https://www.breastcancercare.org.uk/information-support/facing-breast-cancer/living-beyond-breast-cancer/your-body/sex-intimacy>

Royal Pavilion Estate Garden Greeters

Free Event

Royal Pavilion Gardens, Brighton, East Sussex, BN1 1EE



About

Volunteer Greeters will be in the Royal Pavilion Gardens giving out information about its buildings and activities including Brighton Museum & Art Gallery, the Royal Pavilion, the Royal Pavilion Garden, the Dome, the Chapel Royal and the Theatre Royal. Each Greeter has information on the history of the buildings and garden along with lots of useful info for visitors, and there is also have a table offering useful leaflets and maps.

Every Friday, Saturday and Sunday from 2nd June to 30th September 11am – 3pm weather permitting!

2017 SUMMER FASHION

Spring/summer 2017's fashion trends have stylists, buyers, editors and anyone else who is interested super-duper, spin-around-your-closet excited. Why? Well, it's an inherently upbeat season. From the many no-holds-barred interpretations on the 1980s (think lamé, jumbo frills, shoulders, bling and legs) to the most saturated colour palette we've seen in a decade (fuschia, scarlet, heliotrope, hazmat, more fuschia!), joy is oozing from every stitch and every seam. Even stripes and florals—those two trusty pillars of the summer print lineup—are back with more bite, more verve and more tempting iterations to make you think again and look twice.

The spirit of the '80s continues via the runway's adoption of the more literal aesthetic codes as well as the decade's DIY culture—this is a season where YOU make the rules. Want to be a punk princess in one of the hundreds of see-through, peekaboo dresses designers have dreamt up in clouds of tulle and embroidery? Then you can—every day of the week. Fancy the idea of wearing whatever, whenever and however you imagine it in that moment? Then the radical mix 'n' match styling seen at some of the most influential fashion houses on the block will give you the confidence to do so. Céline's Phoebe Philo even went so far as to send her models out in mismatched shoes. Who knew?

So if you've ever thought that warm-weather trends were predictable as hell (yes, we all yawn when nautical rears its seafaring head), then this is going to change your outlook forever more.



<http://www.whowhatwear.co.uk/spring-summer-2017-fashion-trends>

Summer chicken & rice broth



- **Total time:15 minutes**

Serves: 2

Ingredients

600ml chicken stock
1 tbsp light soy sauce
300g pack essential Waitrose British Chicken 2 Breast Fillets, cut into strips
250g pouch Waitrose Microwaveable Whole Grain Rice
150g cherry tomatoes, halved
1 head red chicory, sliced
115g pack baby spinach

Method

1. Bring the stock and sauce to the boil in a saucepan, add the chicken, cover and simmer for 5 minutes.
2. Add the rice, tomatoes and chicory then simmer for 3 minutes (until the chicken is cooked through with no pink meat). Stir in the spinach until just wilted.
3. Season and serve with crusty bread.