Side effects of cancer treatment

About this booklet

This booklet is about the possible side effects of cancer treatment. It is for anyone who is having, or thinking about having, treatment for cancer.

The booklet explains some common side effects of cancer treatment. It also describes ways to manage side effects. Nobody will have all the side effects we mention, but some people may have more than 1.

There may be side effects we do not mention. It is a good idea to read this booklet alongside our information about the type of cancer you have. For more information, visit **macmillan.org.uk/cancer-types**

We also have information about different cancer treatments and the side effects they may cause. Visit **macmillan.org.uk/treatments-and-drugs**

Your nurse or doctor will discuss the treatment you might have and its possible side effects in more detail. We cannot give advice about the best treatment for you. You should talk to your doctor, who knows your medical history.

We hope this booklet helps answer some of the questions you may have. If you find this booklet helpful, you may want to share it with family or friends. They may also want information to help them support you.

How to use this booklet

This booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you.

It is fine to skip parts of the booklet. You can always come back to them when you feel ready. On pages 82 to 90, there are details of other organisations that can help.

Quotes

In this booklet, we have included quotes from people talking about cancer side effects. These people have chosen to share their story with us. To share your experience, visit **macmillan.org.uk/shareyourstory**

For more information

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm, or visit **macmillan.org.uk**

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

We have some information in different languages and formats, including audio, easy read, Braille, large print, interactive PDF and translations. To order these, visit **macmillan.org.uk/otherformats** or call **0808 808 00 00**.

Contents

Cancer treatments and side effects

What are side effects?

Cancer treatments can cause side effects. These are problems caused by the treatment. Side effects can make you feel unwell. Or they might not affect you much at all.

Sometimes you might not know you have a side effect. For example, a side effect could be found in a blood test. Side effects can be physical (affect the body) or emotional (affect the mind).

Most side effects go away quickly. Some go away when your treatment ends. But some side effects last a long time or never go away. Some side effects start months or years after treatment ends. These are called late effects.

Different types of cancer treatment have different side effects. It is normal to worry about side effects. But there are ways to manage and treat them. Your cancer team can support you.

If you are worried about a side effect, it is best to contact your cancer team instead of waiting for your appointment. Your cancer team will give you information about who to call. Depending on the type of treatment, you might be given a 24-hour telephone number to contact.

It is good to have some details ready in case you need to call this number, such as:

- the name of the treatment you are having
- when you last had treatment
- any other medicines you take.

Knowing these details can help the person you call decide whether it is a treatment side effect and what advice to give you.

Treatments for cancer

There are many types of cancer treatment. You may have more than 1 type. Your cancer team will talk to you about your treatment options. When planning your treatment, they will review your general health as well as the type and stage of the cancer.

The most common treatments for cancer are:

- surgery, which is usually an operation to remove a tumour and nearby tissues that may contain cancer cells
- chemotherapy, which uses anti-cancer (cytotoxic) drugs to destroy cancer cells
- radiotherapy, which uses high-energy x-rays to destroy cancer cells
- hormonal therapy, which changes the way hormones are produced, or affects how they work in the body
- targeted therapy, which uses drugs to target something in or around the cancer cell that is helping it to grow and survive
- immunotherapy, which uses the immune system to find and attack cancer cells.

Some treatments are used to treat cancer in 1 area of the body. These are called local treatments. They include surgery and radiotherapy.

Other treatments are used to treat cancer throughout the body. These are called systemic treatments. They include chemotherapy, hormonal therapy, targeted therapy and immunotherapy.

Some cancer treatments are only used for specific types of cancer.

Some treatments aim to cure the cancer. These are sometimes called radical treatments. Other treatments aim to help control the cancer, help prevent it from spreading or treat cancer symptoms. These are sometimes called palliative treatments.

We have more information about treatment decisions in our booklet **Making treatment decisions**.

We also have more information about different cancer treatments and making treatment decisions on our website. Visit:

- **macmillan.org.uk/treatments-and-drugs**
- **macmillan.org.uk/making-treatment-decisions**

You can order our booklets and leaflets for free.
Visit **orders.macmillan.org.uk** or call **0808 808 00 00**.

Talking about side effects

Some side effects are serious and need urgent action. Your cancer team will explain these to you. You will also be given a 24-hour telephone contact number.

Sometimes keeping notes or a diary can be helpful. It might show that your side effects happen at regular times. Your hospital may give you a booklet to use. We have a symptom diary you or a carer can use to record side effects (pages 10 to 15).

Even if you find it difficult to write side effects down, it is important to tell your cancer team.

It helps to include information about the side effect such as:

- the date and time it happened
- how long it lasted
- where it started in the body
- anything that made it worse
- anything that made it better
- how well any treatments worked – including anything you tried that your healthcare team did not prescribe or recommend.

This information can help you talk about side effects with your healthcare team. We have more information on our website. Visit **macmillan.org.uk/talk-healthcare-team**

Symptom diary

How to use your symptom diary

You may want to photocopy the diary, so you can use it more than once. Or you can download a copy from our website. Visit **macmillan.org.uk/signs-and-symptoms-of-cancer**

To use the symptom diary:

1. Write down the date and time when you have the symptom. You can do this as often as you need to.
2. Write down where each symptom is in your body. It could be in 1 area or different areas.
3. Write down what the symptom is and describe what it feels like. You could use the words on the opposite page to help you. Or you can use your own words.
4. Rate each symptom from 0 to 10, where 0 means no symptom and 10 means the symptom is severe.
5. Write down anything that makes the symptom better.

All this information will help you and your healthcare team find the best way to manage your symptoms.

Where is the symptom?

Is it in 1 part of your body or in more than 1 place? Does it start in 1 place and gradually spread during the day?

How would you describe the symptom?

You can use these words, or your own words, to describe your symptom:

- aching
- throbbing
- pricking
- uncomfortable
- constant
- exhausting
- sweaty
- hot
- tight
- scratchy
- frustrating
- worrying
- painful
- comes and goes
- tiring
- bloated
- dry
- burning
- tickly
- embarrassing
- irritating.

Date and time	Where is the symptom?	What is the symptom?

How would you describe it?	How would you rate it?	What helps with it?

Date and time	Where is the symptom?	What is the symptom?

How would you describe it?	How would you rate it?	What helps with it?

Changes to your blood

Low number of blood cells

Cancer treatment can affect your bone marrow, where blood cells are made. This can cause you to have low numbers of blood cells. It mostly happens with chemotherapy. But some targeted therapy and immunotherapy drugs can cause low blood cells too. It only happens with radiotherapy if a large area is being treated.

There are different types of blood cell:

- White blood cells help to fight infection.
- Red blood cells carry oxygen around the body.
- Platelets help stop bleeding and bruising.

You can get different side effects depending on which type of cell is affected. You will have regular blood tests to check your blood cells. Problems caused by low blood cells can usually be managed or treated. Sometimes your doctor might delay a treatment to give your blood cells a chance to recover.

Blood cell numbers usually go back to normal after treatment ends.

Low white blood cell count (neutropenia)

A low white blood cell count is called neutropenia. If the number of white blood cells is low, you are more likely to get an infection.

It is important to get any infection treated as soon as possible. Contact the hospital straight away on the 24-hour number if you have any of the following symptoms:

- a temperature above 37.5°C
- a temperature below 36°
- you feel unwell, even with a normal temperature
- you have symptoms of an infection.

Symptoms of an infection include:

- feeling shivery and shaking
- a sore throat
- a cough
- breathlessness
- diarrhoea
- needing to pass urine (pee) often, or discomfort when you pass urine.

It is important to follow any advice your cancer team gives you.

Your cancer doctor or nurse will tell you when your white blood cell levels are most likely to be low. It is important to take extra care to prevent infection at these times.

Sometimes they may give you a drug to stimulate your bone marrow to make more white blood cells. This drug is called G-CSF. We have more information on our website. Visit **macmillan.org.uk/g-csf**

What you can do that may help

- Avoid people who have an infection or are feeling unwell.
- Wash your hands regularly, but especially before preparing food and after going to the toilet.
- Ask your doctor or nurse if there are foods or activities you should avoid.
- Try to avoid busy travel times and crowded places.

Low red blood cell count (anaemia)

Cancer treatment can reduce the number of red blood cells in your blood. Red blood cells carry oxygen around the body. If the number of red blood cells is low, this is called anaemia.

You may feel:

- very low in energy
- breathless
- dizzy and light-headed.

Tell your doctor, nurse or pharmacist if you feel like this. If you are very anaemic, you may need a drip to give you extra red blood cells. This is called a blood transfusion.

Low platelet count

Cancer treatment can reduce the number of platelets in your blood. Platelets are cells that help the blood to clot.

If your platelets are low, you may bruise or bleed easily. You may have:

- nosebleeds
- bleeding gums
- heavy periods
- blood in your urine (pee) or stools (poo)
- tiny red or purple spots on your skin that may look like a rash.

Tell your doctor, nurse or pharmacist if you have any unexplained bruising or bleeding. Some people may need a drip to give them extra platelets. This is called a platelet transfusion.

What you can do that may help

- Use a soft toothbrush.
- Use an electric razor.
- Take care to avoid injury – for example, wear gloves for gardening.
- Avoid sports and activities that can lead to injuries.

Tiredness and cancer treatment

Fatigue (tiredness)

Fatigue means feeling very tired or exhausted most, or all, of the time. Many cancer treatments can cause fatigue. Some can cause anaemia, which causes fatigue (page 20).

For most people, fatigue gets better after treatment ends. But for some, it may continue.

Fatigue can have a big impact on your everyday life and how you feel overall. Talk to your healthcare team, as there are things they can do to help. For example, they may be able to treat some of the causes of fatigue, such as anaemia.

Your healthcare team can also give you advice or treatment. For example, they can give you advice about managing pain or eating problems (pages 30 to 37).

We have more information about fatigue in our booklet and audiobook **Coping with fatigue (tiredness)**.

You can order our booklets and leaflets for free.
Visit **orders.macmillan.org.uk** or call **0808 808 00 00**.

What you can do that may help

- Spread tasks out over the week. If you have a big task, break it down into smaller, easier ones.
- Try to plan your day so that you have energy to do the things you want to do most.
- Ask for help with childcare, housekeeping, shopping and preparing meals. Friends and relatives may want to help and are usually pleased to be asked.
- Think about arranging your home to make life easier.
- Do your shopping online and have it delivered.
- Listen to audiobooks if you are too tired to read.
- If you are working, talk to your employer or human resources (HR) department and tell them that you may need time off. They can also make changes to your working pattern or role to make work less tiring (reasonable adjustments). We have more information in our booklet **Work and cancer**.
- Some people find that complementary therapies can help them cope with the side effects of cancer treatment. We have more information in our booklet and audiobook **Cancer and complementary therapies**.

Physical activity

There is good evidence that physical activity is one of the best ways to help reduce the symptoms of fatigue.

Before you start doing any physical activity or increase the amount you do, get advice from a healthcare professional. They can advise you on the type and amount of activity that is safe for you. Talk to them about any other medical conditions you have, such as high blood pressure, diabetes or lung problems. These may be affected by physical activity.

We have more information:

- in our booklet **Physical activity and cancer**
- online at **macmillan.org.uk/physical-activity-cancer**

You can order our booklets and leaflets for free.
Visit **orders.macmillan.org.uk** or call **0808 808 00 00**.


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Mouth and eating problems

Eating problems

Some cancer treatments can cause eating problems. Side effects such as feeling sick, having a sore or dry mouth, and tiredness can all make eating difficult. Eating problems include the following:

- Loss of appetite – you may lose weight during treatment.
- Increased appetite – some medicines, including steroids, can cause this. You may gain weight during treatment.
- Taste changes – some chemotherapy drugs cause this.
- Indigestion and heartburn – this is discomfort in the upper part of the tummy, often after meals. It can be caused by surgery to the stomach, radiotherapy or some medicines, including some cancer treatments.

Talk to your doctor or nurse if you have any problems. They can refer you to a dietitian. If you are at home, your GP or district nurse may be able to refer you to a community dietitian. They can visit you at home.

What you can do that may help

Loss of appetite

- Have smaller meals more often. Use a smaller plate and make your food look attractive to eat.
- Keep snacks nearby to eat between meals. These can include nuts, crisps, dried fruit or cheese and crackers. If you need something softer, try yoghurt, peanut butter or fromage frais.
- If you have lost weight, add extra calories to your food. You can add butter, full-fat milk or cream.

Increased appetite

- If you are hungry and want to eat more, try to eat healthy foods such as fruit and vegetables instead of sweets and crisps.
- Aim to have the same-sized portions as you usually do.
- Drink less alcohol. Alcohol is high in calories and can contribute to weight gain.
- Try to be physically active to reduce the chance of putting on weight.

Taste changes

- Season food or add spices and herbs to add flavour when cooking.
- Serve food with sauces to add flavour. Be careful if your mouth is sore as some sauces, such as curry or sweet and sour, may feel painful to eat.
- Sharp-tasting foods can be refreshing and leave a pleasant taste in your mouth. These include fresh fruit, fruit juices and sugar-free sour or boiled sweets.
- Some people find that cold foods taste better than hot foods. You may find it helps to let your food cool before eating it.
- Use plastic cutlery if you have a metallic taste in your mouth.
- If you no longer like tea or coffee, try fruit or herbal teas or a cold drink.

Indigestion and heartburn

- Try to avoid large meals.
- Avoid food or drinks that cause you discomfort. These might include alcohol, fatty and spicy foods, fizzy drinks, chocolate, chewing gum or hard-boiled sweets.
- Try to relax and not do too much for at least 45 to 60 minutes after eating.
- Avoid eating or drinking tea or coffee for 3 or 4 hours before going to bed.
- There are medicines that can help. Talk to your healthcare team about what might be best for you.

We have more information about eating problems and cancer in our booklet and audiobook **Eating problems and cancer** (page 76).

> **"I have changes in taste. I have a constant background taste of salt. I can't detect delicate flavours, and I cannot tolerate anything that is hot in temperature, so food and drink has to be lukewarm before I can tolerate it in my mouth."**
>
> Elise, diagnosed with bone cancer

Feeling sick (nausea)

Your cancer team will usually prescribe anti-sickness (anti-emetic) drugs if sickness is a possible side effect of your treatment.

There are different anti-sickness drugs that can help prevent nausea. Your healthcare team can prescribe these for you. Tell your healthcare team if the drugs are not helping. They can prescribe a different type.

Anti-sickness drugs work better when you take them regularly. Some anti-sickness drugs can make you constipated. Let your doctor or nurse know if this happens.

What you can do that may help

- Try eating dry food before you get up in the morning – for example, toast or crackers.
- Prepare small meals and eat little and often.
- Avoid eating or preparing food when you feel sick. Ask someone to prepare meals for you.
- Avoid fried, fatty foods with a strong smell.
- Sipping a fizzy drink may help. Try mineral water, ginger ale, lemonade or soda water.
- Food or drinks containing ginger or peppermint can help with nausea. You could try ginger or peppermint tea, crystallised ginger or ginger biscuits.

Mouth or throat problems

Some cancer treatments can damage the cells that line your mouth or throat. Your mouth may become very sore. Some people develop mouth ulcers.

Treatments that can cause mouth problems include chemotherapy, radiotherapy, targeted therapy and immunotherapy. Any damage is usually temporary. Most side effects get better after treatment ends.

Looking after your mouth

Your healthcare team will talk to you about how to look after your mouth during and after treatment. Following a regular mouth care routine can help prevent or reduce mouth problems:

- Brush your teeth and gums 2 to 4 times a day. Use a soft-bristled toothbrush and fluoride toothpaste. Replace your toothbrush regularly. Do not rinse your mouth after brushing.
- Use a mouthwash to rinse your mouth at least 4 times a day. You can use water or salt water. Use at a different time from brushing your teeth.
- If you have dentures, rinse them after each meal. Clean your dentures with a toothbrush and toothpaste or denture paste. At night, clean and dry them, then store in a covered container.
- Keep your lips moist by using Vaseline® or a lip balm. You need to use a water-based lip balm if you are having radiotherapy or oxygen therapy.

Your healthcare team may prescribe mouthwashes for you to use. They may also prescribe a gel that can protect the lining of your mouth and help with pain and discomfort.

Sore mouth or throat

If you have a sore mouth or mouth ulcers, you are more likely to get an infection. The most common infection is oral thrush. This usually looks red with white patches. It can cover the lining of the mouth, tongue or throat. Your doctor can prescribe medicine to treat thrush.

Tell your healthcare team if you have a sore mouth or throat. They can give you treatments to help. If your mouth is very sore, you may need to take regular painkillers and have a diet of soft foods.

What you can do that may help

- Follow a good mouth care routine. Follow the advice of your doctor or specialist nurse. Use any gels or mouthwashes as your doctor or nurse advises.
- Try to drink plenty of fluids.
- Try to avoid rough-textured food like toast or raw vegetables.
- Keep your food moist by adding sauces or gravy.
- Cold food and drinks may be soothing. Try eating ice cream or soft, milk jellies or adding crushed ice to drinks.
- You may find taking painkillers before meals will help.

Swallowing problems

A sore mouth and throat can make swallowing painful. Having radiotherapy or surgery to your mouth and throat can also affect swallowing.

Tell your cancer team about any swallowing problems you have. They can give you information and support to help. They may refer you to a dietitian. If you have had surgery or radiotherapy to your mouth or throat, they may refer you to a speech and language therapist for assessment and treatment.

What you can do that may help

- Choose soft foods that are easy to swallow, such as scrambled eggs or tofu, milk puddings or yoghurt.
- Soften foods with sauces and gravy.
- Chop meat and vegetables finely and cook them for a long time. For example, you could make a stew or casserole.
- If you have a blender or food processor, you could liquidise cooked foods.

Dry mouth

Some cancer treatments can cause the salivary glands in the mouth to make less saliva, causing a dry mouth. This can be temporary or permanent. Lack of saliva can increase the risk of tooth decay or infections. Your doctor may prescribe an artificial saliva product to help moisten your mouth.

What you can do that may help

- Take frequent sips of water. This can help keep your mouth moist. Carry a bottle of water with you when you go out.
- Try chewing sugar-free gum or sucking on sugar-free sweets. This can help you produce more saliva.
- Avoid alcohol and caffeinated drinks. These can make your mouth dry.
- Do not smoke. This can irritate your mouth and make it feel dry. The NHS has information about stop smoking services (page 86).
- Use a lip balm to protect your lips. You need to use a water-based lip balm if you are having radiotherapy or oxygen therapy.
- Add gravy, sauces and dressings to moisten food.

We have more information about mouth and eating problems in our booklet and audiobook **Eating problems and cancer** (page 76).

Changes to your appearance

Hair loss and changes to hair

Some cancer treatments, such as some chemotherapy drugs, can cause hair loss. You may lose some of your hair or it may all fall out. Hair loss is usually temporary. Some cancer treatments can cause permanent hair loss on parts of the body.

You may not lose all your hair, but the condition and texture of your hair may change.

Not all chemotherapy drugs cause hair loss. The level of hair loss can vary. It may be hardly noticeable, or you may lose all your hair.

This depends on:

- the drug or combination of drugs you are having
- the dose of each drug
- how your body reacts – different people react in different ways to the same drug.

We have more information about hair loss and changes to hair:

- in our booklet and audiobook **Coping with hair loss** (page 76)
- on our website at **macmillan.org.uk/hairloss**

Your feelings

People have different feelings about losing their hair. You may lose self-confidence or feel anxious. All these feelings are completely normal.

You might also worry about how losing your hair will affect relationships with family or friends. Many people find that their family or friends are very supportive. You may find it helpful to talk with them about how losing your hair makes you feel. We have more information in our booklet and audiobook **How are you feeling? The emotional effects of cancer** (page 76).

For some people, hair loss is one of the hardest parts of having treatment. For others, it is not as bad as they expected. Your doctor or specialist nurse will tell you if you are likely to lose your hair.

With most treatments, hair usually grows back or returns to how it was a few months after treatment ends.

Scalp cooling

Scalp cooling is a way of reducing or preventing hair loss caused by chemotherapy. It is often called a cold cap or cool cap. Scalp cooling reduces the temperature of the scalp which can stop some chemotherapy drugs from affecting the hair follicles.

Scalp cooling is only effective with certain chemotherapy drugs. How well it works varies. Your doctor or chemotherapy nurse can tell you if it is available and suitable for you.

We have more information about scalp cooling on our website. Visit **macmillan.org.uk/scalp-cooling**

What you can do that may help

These tips can help you care for dry, brittle or thinning hair.

- Wash your hair as you normally would. Washing will not make hair loss worse or make hair fall out faster. The important thing is to keep your hair and scalp clean.
- You may want to use a gentle, fragrance-free shampoo that does not contain any harsh chemicals. If you are unsure what to use, check with your healthcare team.
- Be gentle when using a towel to dry your hair. Do not rub hard, as this can damage the hair.
- When your hair is wet, use a wide-toothed comb. This causes less damage than using a brush.
- Avoid too much heat from hairdryers or heated rollers. These can cause the hair to split and break.
- It may help to get professional advice if you want to colour or perm your hair.

Skin and nail changes

Some cancer treatments can affect your skin and nails. Different treatments can affect your skin in different ways. Your healthcare team will tell you about any changes that might happen due to cancer treatment. Tell your doctor or nurse about any skin or nail changes.

Your cancer team may give you advice about looking after your skin. It is very important to follow their advice. There may be some products you need to use or need to avoid.

What you can do that may help

If your skin is dry or itchy, use a moisturiser at least 2 times a day on your face and body. You may need a richer moisturiser than you usually use.

- If your skin is very itchy, protect your skin from scratches by keeping your nails clean and short. Instead of scratching, try to rub or pat itchy areas.
- If you are having radiotherapy, wear loose-fitting clothes around the area that is being treated. Only use skin products as advised by the radiotherapy staff.
- If you are out in the sun, use suncream with a high sun protection factor on exposed areas (at least SPF 30). Protect your skin by staying out of the sun at the hottest time of the day.

Sore hands and feet

Some cancer drug treatments can make the palms of your hands or the soles of your feet sore. The skin may become red if you have white skin. It may become darker if you have black or brown skin.

You may also have pain or tingling in your palms or soles. This is called palmar-plantar or hand-foot syndrome. Tell your doctor or specialist nurse if this happens.

What you can do that may help

- Keep your hands and feet cool.
- Gently moisturise your hands and feet regularly.
- Protect your hands by wearing gloves when working in the house or garden.
- Avoid tight-fitting socks, shoes and gloves.

Nail changes

Some treatments may make your nails grow more slowly or break more easily. You might notice ridges on your nails or white or dark lines across them. Sometimes nails can become loose or fall out.

Tell your doctor or nurse about any changes to your nails. Your nails should go back to normal after cancer treatment ends.

What you can do that may help

- Keep your nails clean and clipped short.
- Moisturise your nails and cuticles regularly.
- Wear gloves while doing housework or gardening.
- Wear comfortable shoes.

Lymphoedema

Lymphoedema is swelling that develops when lymph fluid builds up in the body's tissues. The lymphatic system usually drains the fluid away. The lymphatic system is part of the body's immune system, which helps us fight infections and other illnesses.

Lymphoedema can develop if you have had lymph nodes removed or treated with radiotherapy. It can develop months or even years after cancer treatment. It can happen anywhere in the body. The most common place for lymphoedema to develop is the arm or leg.

If you develop lymphoedema, you will usually be referred to a lymphoedema specialist. They can offer advice about:

- looking after your skin
- exercises and how to position the affected limb
- using compression garments, bandages or pumps to control the swelling
- a type of massage called simple lymphatic drainage (SLD) to help drain the fluid.

Your doctor or nurse will tell you if your treatment may increase your risk of developing lymphoedema. We have more information:

- in our booklet and audiobook **Understanding lymphoedema**
- on our website at **macmillan.org.uk/lymphoedema**

Body image

Body image is how we think and feel about how our body looks and works. These thoughts and feelings can affect our behaviour and how we believe others see us.

Changes in your body can affect your body image. Changes may be temporary or permanent. For example, hair loss is usually temporary, but a scar from surgery is a permanent change. You may feel upset about changes to your body. You may feel less confident and that you are not the person you used to be. These feelings are quite normal, but they can lead to anxiety or depression.

If you feel you need help to cope with and adjust to body changes, talk to your doctor or specialist nurse. They can refer you to a trained counsellor or psychologist for help.

You may find it helpful to talk to other people who are affected in a similar way. We have an Online Community, where people can share their worries and thoughts at any time. Visit **macmillan.org.uk/community**

We have more information about body image and cancer in our booklets:

- **Body image and cancer**
- **Feel more like you**.

You can order our booklets and leaflets for free. Visit **orders.macmillan.org.uk** or call **0808 808 00 00**.

Bowel and bladder changes

Bowel changes

Bowel changes can be a common side effect of cancer treatments.

Surgery to the bowel or other organs in the digestive system can cause bowel changes.

Cancer drug treatments or other medications, such as anti-sickness drugs, can cause constipation.

Cancer drug treatments can also cause diarrhoea (pages 52 to 53). This includes some chemotherapy drugs and targeted therapy. Immunotherapy can cause the immune system to become too active. This can also cause bowel problems.

Radiotherapy to the lower tummy (the pelvic area) can cause diarrhoea.

Constipation

Constipation means that you are not able to pass stools (poo) as often as you normally do. It can become difficult or painful.

Constipation can be a common problem when you are having treatment. Many people find it difficult to talk about. As a general guide, you should tell your cancer team if you have not passed stools at least 3 times during the last week, or if you are having less regular bowel movements. They can give you advice and treatment.

Signs of constipation can also include:

- feeling like you have not emptied your bowel, but being unable to pass any more stools
- feeling that your tummy is bloated and uncomfortable or you feel sick.

Constipation can be caused by:

- a lack of fibre in your diet
- not drinking enough
- not being active
- some medicines – for example, strong (opioid) painkillers, such as morphine and codeine, iron tablets and some anti-sickness drugs.

If you have constipation, your doctor, nurse or pharmacist might recommend a laxative. Laxatives are medicines used to treat constipation. There are different types.

What you can do that may help

- Try to have plenty of fibre in your diet, unless your cancer team tells you differently. You can get fibre from wholegrain bread and cereals, as well as from vegetables and fruit with their skin on. It is also in bran and seeds.
- Try to drink at least 2 litres (3½ pints) of fluid a day, unless your healthcare team tells you differently.
- Try regular gentle exercise, such as walking. This will help keep your bowels moving.
- Try natural remedies for constipation. These include apricots, dried fruit, prunes, prune juice and syrup of figs.

It is always best to check with your cancer team. You may have different needs relating to your cancer type or treatment.

If you have cancer of the gullet (oesophagus) or bowel, always ask your doctor, nurse or pharmacist before having fibre. They can give you specific advice about dealing with constipation.

Diarrhoea

Diarrhoea means passing more stools (poo) than is usual for you, or having watery or loose stools. If you have a stoma, it may be more active than usual.

Many cancer treatments and medications, such as antibiotics, can cause diarrhoea. It can also be caused by an infection.

Diarrhoea may be a temporary, mild problem. But for some people, it can be severe and cause dehydration. They can become very unwell and need to meet with a doctor or contact the hospital to help manage it. It is important to tell your cancer team if you have diarrhoea, if it is getting worse, or anti-diarrhoea treatment is not helping. It is also important to follow any advice your cancer team has given you.

Sometimes severe constipation can be mistaken for diarrhoea. If hard stools block the bowel, liquid stool may pass around it. This is called overflow, which can look like diarrhoea. Your doctor or nurse can examine you and check if you are constipated (pages 50 to 52).

What you can do that may help

- Drink plenty of fluids to replace the fluid lost with the diarrhoea.
- Avoid alcohol and coffee. Also avoid fizzy drinks, which can cause wind and stomach cramps.
- Cut down on fibre from cereals, fruit and vegetables.
- Avoid most milk and dairy products, until the diarrhoea has stopped.
- Avoid spicy or high-fat foods.
- Eat small, frequent meals of light food – such as white fish, chicken, eggs, white bread, pasta and rice.

It is always best to check with your cancer team. You may have different needs relating to your cancer type or treatment.

Bladder changes

Some cancer treatments can change how your bladder works. Surgery to the bladder or to nearby organs, such as the prostate, can also cause problems.

Some chemotherapy drugs can irritate the bladder. You may be given other drugs to help prevent that.

Radiotherapy to the pelvis (the lower tummy area) can cause changes in the way the bladder works. It can also affect the muscles that support the bladder.

Bladder problems might include:

- needing to pass urine (pee) more often than usual (frequency)
- being unable to wait to empty your bladder (urgency)
- leaking urine (incontinence)
- blood in your urine (haematuria)
- difficulty passing urine, or a feeling you still have urine left in your bladder after going to the toilet (retention).

Talk to your cancer team if you have any bladder changes. They can help and support you and suggest treatments to help.

Tell your doctor or nurse if you have a burning feeling or pain when you pass urine, or if your urine is cloudy or smells strongly. You may be asked to give a urine sample to check if you have an infection. An infection is a common cause of symptoms and is easy to treat.

What you can do that may help

- Try to drink at least 2 to 3 litres (3½ to 5½ pints) of fluids a day, unless your cancer team tells you differently. This is to keep your urine a clear or pale-yellow colour.
- Avoid drinks such as tea, coffee, cola and alcohol. These can irritate your bladder and make symptoms worse.
- Try to avoid constipation. This is when you are not able to pass stools (poo) as often as you normally do. Constipation can make bladder problems worse. We have more information and tips on how you can try to avoid constipation on pages 50 to 52.
- If you smoke, try to cut down or stop. Smoking can make the symptoms of bladder irritation worse. The NHS has information about stop smoking services (page 86). We also have information on our website. Visit **macmillan.org.uk/stop-smoking**

Managing bowel and bladder problems

If you have problems with bowel or bladder control, planning ahead so you are prepared can help you feel more confident. Talk to your cancer team about what you can do.

Protecting your skin

If you have problems with leaking (incontinence) from your bladder or bowel, it can make the skin in that area sore.

You can protect your skin by keeping it clean and dry. There are lots of products available to help you. Your continence adviser can give you more information.

Going out

You may feel worried about going out, especially to somewhere new. Pack a bag of the things you may need when you go out. This will help you feel more confident.

You may want to include:

- wet wipes or tissues
- a non-oil barrier cream
- pads and pants
- a change of clothes
- a sealable bag
- your Macmillan toilet card.

Access to toilets

It may help to find out where public toilets are before you go out. The Great British Toilet map can help you to find public toilets by postcode or through the location on your mobile phone. You can check the map at **toiletmap.org.uk** There are also toilet apps for mobile phones.

Macmillan has a free toilet card you can use. The card says you have a medical condition that means you need urgent access to a toilet. To get a Macmillan toilet card, you can:

- order one from **orders.macmillan.org.uk**
- call the Macmillan Support Line and speak to a cancer support specialist.

The National Key Scheme for Toilets offers access to about 9,000 locked public toilets across the UK. You can buy a key online from places such as Disability Rights UK (page 88). It also has a guide that explains where the toilets are.

Call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm. ☎

Sex and fertility changes

Changes to your sexual wellbeing

Treatment for cancer usually causes some sexual side effects. These can depend on the type of treatment you have and how you are feeling.

Some side effects affect your general wellbeing. This can also affect your sexual wellbeing. For example, you are less likely to be interested in sex if you feel unwell or tired.

Other side effects can change how you look and feel about your body. This might include a visible change, such as scars or hair loss. Or it could be something less visible, such as bladder or bowel problems (pages 50 to 57) or having a stoma. These changes can affect your confidence or how you feel about your body and sex.

Some side effects can change how your body and sex organs work during sex. These side effects may happen if a treatment affects the levels of sex hormones. Or they may happen if a treatment damages tissue, nerves or blood vessels in the pelvic area.

These side effects may include:

- changes in sexual sensation
- erection or ejaculation problems
- vaginal dryness or other vaginal changes
- anal or rectal changes
- loss of sex drive.

The treatments most likely to cause these types of side effect are:

- surgery or radiotherapy to the pelvic area
- hormonal therapy drugs for breast or prostate cancer.

Many side effects get better after treatment ends, but some side effects may be long-lasting or permanent. Some side effects can start months or years later.

It can feel embarrassing to talk about sex. But try to talk to your cancer team about how you are feeling. It is okay to use words you feel comfortable with instead of the medical words. Your cancer team are used to talking about these side effects and can offer help and support.

What you can do that may help

If you have a partner, talk to them about how you feel. Explaining why you do not feel like having sex can reassure them that it is not because your feelings for them have changed.

If you have a partner, you can cuddle and touch and explore new ways of giving each other pleasure.

If tiredness is a problem, it might help to consider what times of day you have more energy.

Try different sexual positions to find which are most comfortable for you.

We have more information about sexual wellbeing and cancer:

- in our booklet and audiobook **Cancer and your sex life** (page 76)
- online at **macmillan.org.uk/sex-and-cancer**

This includes information about who can help and how to talk to your healthcare team about sex.

Fertility

Fertility means being able to get pregnant or make someone pregnant. Cancer treatment can affect fertility in different ways. Sometimes the effects are temporary. But sometimes they are permanent.

Being told you have cancer and that treatment may affect your fertility can be very difficult. The possibility of not being able to have children may be as difficult to accept as the cancer diagnosis. You may have planned to have children in the future. Or you may not have thought about it before treatment. Practical and emotional help is available.

Some people may be able to protect their fertility before starting cancer treatment. This may involve collecting and storing sperm, eggs, embryos or tissue from the testicle or ovary.

What you can do that may help

- Ask your doctor or specialist nurse about how treatment may affect your fertility before treatment starts.
- If you have a partner, talk to them about the possible effects on your fertility.
- Ask to be referred to a specialist fertility team.

We have more information about fertility:

- in our booklet **Cancer and fertility** (page 76)
- online at **macmillan.org.uk/fertility**

"Never would I imagine having to consider my fertility at such a young age. This meant I had to make some decisions as a woman. I didn't want to regret this decision years down the line and it was at that point I realised just how much motherhood meant to me. „

Raveen, diagnosed with Hodgkin lymphoma


UROLOGY
PROSTATE
NHS

Other side effects

Hormonal changes

Hormones control many different processes in the body. Some hormonal therapy treatments can change the levels of the sex hormones oestrogen and testosterone.

Side effects of hormonal therapy can be temporary or permanent. They can include:

- hot flushes and sweats
- mood changes
- lowered sex drive (pages 60 to 61)
- erection problems
- vaginal dryness
- tiredness (pages 24 to 26).

Some side effects from hormonal therapy may improve as you adjust to the treatment – for example, hot flushes and sweats. Other side effects can be managed, so it is good to tell your doctor, nurse or pharmacist if you are having them. We have more information on our website at **macmillan.org.uk/hormonal-therapy**

Immunotherapy can affect how your body makes hormones. You may have regular blood tests to check hormone levels and treatment to manage them. If you are having immunotherapy, your cancer team will advise you what to look out for.

Sometimes side effects of immunotherapy can start after you finish treatment. If you notice hormonal side effects during or after treatment with immunotherapy, tell your doctor or nurse straight away. They can advise and treat you. We have more information online. Visit **macmillan.org.uk/immunotherapy**

What you can do that may help

- If you are having hot flushes and sweats, choose natural fabrics for your clothes and bedding, such as cotton. Wear layers so you can remove clothes as needed. Keep the room cool, or use a fan. Have lukewarm showers and baths, rather than hot ones. Cold drinks may help, but you should avoid alcohol and caffeine.
- If you notice changes in your mood or sex drive, talk to your cancer team. They can offer you treatments and support, or refer you to a counsellor. We have information you may find useful in our booklet and audiobook **Cancer and your sex life**.
- Talk to your cancer team about the treatments and support available for side effects such as erection problems and vaginal dryness.
- Being more physically active can help to manage tiredness and give you more energy. It helps you to sleep better and it can reduce stress and help to look after your bones. We have more information in our booklet **Physical activity and cancer**.

You can order our booklets and leaflets for free.
Visit **orders.macmillan.org.uk** or call **0808 808 00 00**.

Changes in memory or concentration

Some people notice changes in memory or concentration and their ability to think clearly during cancer treatment. These changes are often called cancer-related cognitive changes (CRCCs).

They are sometimes called brain fog or chemo brain. But changes in memory and concentration can affect people who have had other treatments, such as hormonal therapy.

Any problems with concentration or memory are usually temporary and mild. But they can be frustrating and interfere with your normal activities.

> **"When I am in meetings, I find that I lose my concentration so easily. Everyday tasks and appointments have to go on my calendar as my memory has been affected. If I don't record things in my calendar straight away, they're gone."**
>
> Mary, diagnosed with a brain tumour

Common symptoms include:

- being unusually disorganised
- getting distracted more easily
- finding it hard to remember things
- feeling like you cannot think clearly
- extreme tiredness (fatigue)
- feeling low in mood.

What you can do that may help

- Keep things simple and have a daily routine.
- Do not take on too much. Try to do 1 thing at a time and avoid distractions.
- Carry a notebook or use reminder alarms or notes on your phone.
- Use a diary or calendar app to help you remember important dates and appointments.
- Keep your mind active by doing crosswords, word games or number puzzles like sudoku.
- Try being more physically active. This can help you feel more alert and less tired.
- Make sure you get enough rest. Relaxation can help to reduce stress and may help to improve your memory and concentration.

Tell your cancer team if you notice changes in your memory or ability to concentrate. They can give you more information and support.

Numbness or tingling in hands and feet

Some cancer treatments can damage the nerves that carry messages between the central nervous system (the brain and spinal cord) and the rest of the body (the peripheral nerves). This causes numbness or tingling in the hands or feet. This is called peripheral neuropathy.

As well as having numbness or tingling, you may find it hard to do fiddly tasks such as fastening buttons or tying shoelaces. Peripheral neuropathy can make you feel unsteady on your feet.

It is important to let your doctor or nurse know if you have any of these symptoms. Sometimes your doctor will change the dose or type of drug. They can suggest things to help and may give you medicines to help relieve your symptoms.

Peripheral neuropathy usually improves slowly a few months after the treatment has finished. But for some people, it can be a long-term side effect.

If your hands or feet are affected, it is important to protect them as much as possible.

What you can do that may help

- To avoid injury, wear gloves when working with your hands. For example, wear gloves to garden or wash dishes. Be careful when cutting your nails.
- Take care to avoid cutting or burning your hands when preparing food and cooking.
- Check the temperature of water with your elbow to make sure it is not too hot before washing.
- Wear clothes without buttons or zips, or shoes without laces.
- Wear gloves and warm socks in cold weather. Be careful that hot water bottles are not too hot.
- Avoid walking around barefoot. Wear well-fitting shoes or boots.
- Try talking to others with similar side effects. Or join an online forum such as our Online Community. Visit **macmillan.org.uk/community**

We have more information about peripheral neuropathy on our website. Visit **macmillan.org.uk/peripheral-neuropathy**

Blood clots (thrombosis)

Some cancer treatments can increase the risk of developing a blood clot. Blood clots can be very serious if they are not treated. If you have a blood clot, you may need drugs to thin your blood. These are called anticoagulants. If you are at risk, your doctor may prescribe medicines to stop blood clots forming.

The most common places for a blood clot to form are the:

- leg – usually the calf
- arm
- lungs.

Symptoms of a blood clot depend on where it is:

- A blood clot in the leg or arm may cause throbbing pain, swelling or heat in the affected area. The skin may become red. If you have black or brown skin, redness may be harder to notice, but the skin may become darker. A blood clot in the leg or arm is called a deep vein thrombosis (DVT).
- A blood clot in the lungs may cause shortness of breath, coughing or chest pain. Some people cough up blood. A blood clot in the lungs is called a pulmonary embolism (PE).

Contact your cancer team or hospital straight away on the 24-hour number they have given you if you have any of these symptoms during or after treatment.

You should always call **999** if you have:

- chest pain
- difficulty breathing.

Some things can help lower your risk of blood clots. These include:

- taking short walks regularly
- exercising the muscles in your legs regularly, even when you are not walking around
- drinking plenty of fluids – but avoid alcohol as this can make you dehydrated
- taking deep breaths to keep your blood flowing
- trying to avoid crossing your legs while sitting
- staying a healthy weight.

If you are worried about your risk of blood clots, talk to your cancer team. They can tell you about things that may reduce your risk.

We have more information about preventing and treating blood clots on our website. Visit **macmillan.org.uk/blood-clots**

Further information

About our information

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

Our information has the PIF Tick quality mark for trusted health information. This means our information has been through a professional and strong production process.

Order what you need

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

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

Online information

All our information is also available online at **macmillan.org.uk/information-and-support** You can also find videos featuring stories from people affected by cancer, and information from health and social care professionals.

Other formats

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

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- interactive PDFs
- large print
- translations.

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

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

The language we use

We want everyone affected by cancer to feel our information is written for them.

We want our information to be as clear as possible. To do this, we try to:

- use plain English
- explain medical words
- use short sentences
- use illustrations to explain text
- structure the information clearly
- make sure important points are clear.

We use gender-inclusive language and talk to our readers as 'you' so that everyone feels included. Where clinically necessary we use the terms 'men' and 'women' or 'male' and 'female'. For example, we do so when talking about parts of the body or mentioning statistics or research about who is affected.

To find out more about how we produce our information, visit **macmillan.org.uk/ourinfo**

Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our support line is made up of specialist teams who can help you with:

- emotional and practical support if you or someone you know has been diagnosed with cancer
- clinical information from our specialist nurses about things like diagnosis and treatments
- welfare rights advice, for information about benefits and general money worries.

To contact any of our teams, call the Macmillan Support Line for free on **0808 808 00 00**. Or visit **macmillan.org.uk/support-line** to chat online and find the options and opening times.

Our trained cancer information advisers can listen and signpost you to further support.

Our cancer information nurse specialists can talk you through information about your diagnosis and treatment. They can help you understand what to expect from your diagnosis and provide information to help you manage symptoms and side effects.

If you are deaf or hard of hearing, call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

You can also email us, or use the Macmillan Chat Service via our website. You can use the chat service to ask our advisers about anything that is worrying you. Tell them what you would like to talk about so they can direct your chat to the right person. Click on the 'Chat to us' button, which appears on pages across the website. Or go to **macmillan.org.uk/talktous**

If you would like to talk to someone in a language other than English, we also offer an interpreter service for our Macmillan Support Line. Call **0808 808 00 00** and say, in English, the language you want to use. Or send us a web chat message saying you would like an interpreter. Let us know the language you need and we'll arrange for an interpreter to contact you.

Macmillan Information and Support Centres

Our Information and Support Centres are based in hospitals, libraries and mobile centres. Visit one to get the information you need and speak with someone face to face. If you would like a private chat, most centres have a room where you can speak with someone confidentially.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you have been affected in this way, we can help. Please note the opening times may vary by service.

Financial advice

Our expert money advisers on the Macmillan Support Line can help you deal with money worries and recommend other useful organisations that can help.

Help accessing benefits

You can speak to our money advisers for more information. Call us free on **0808 808 00 00**. Visit **macmillan.org.uk/financialsupport** for more information about benefits.

Help with work and cancer

Whether you are an employee, a carer, an employer or are self-employed, we can provide information to help you manage cancer at work. Visit **macmillan.org.uk/work**

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That is why we help bring people together in their communities and online.

Support groups

Whether you are someone living with cancer or a carer, family member or friend, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting **macmillan.org.uk/selfhelpandsupport**

Online Community

Thousands of people use our Online Community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at **macmillan.org.uk/community**

You can also use our Ask an Expert service on the Online Community. You can ask a money adviser, cancer information nurse or an information and support adviser any questions you have.

Macmillan healthcare professionals

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

Other useful organisations

There are lots of other organisations that can give you information or support. Details correct at time of printing.

Support with side effects

Bladder and Bowel Community

Home Delivery Service: **0800 031 5406**
www.bladderandbowel.org
Provides information and advice on a range of bladder and bowel symptoms and conditions.

Daisy Network

www.daisynetwork.org
A support group for women who have early ovarian failure. It gives information about premature menopause and related issues. It also has a mailing list for subscribers and details of other helpful groups.

Support with relationships and sexuality

College of Sexual and Relationship Therapists

www.cosrt.org.uk
A national specialist charity for sex and relationship therapy. Has a list of qualified practitioners and clinics providing sex and relationship therapy in the UK.

Prostate Cancer UK sexual support service

Helpline **0800 074 8383**
www.prostatecanceruk.org/prostate-information-and-support/get-support/sexual-support
A service for people with prostate cancer and their partners to help with sexual problems after treatment for prostate cancer.

General cancer support organisations

Black Women Rising

www.blackwomenrisinguk.org
Aims to educate, inspire and bring opportunities for women from the BAME community. Shares stories and supports Black cancer patients and survivors through treatment and remission.

Cancer Black Care

Tel **0734 047 1970**
www.cancerblackcare.org.uk
Provides support for all those living with and affected by cancer, with an emphasis on Black people and people of colour.

Maggie's

Tel **0300 123 1801**
www.maggies.org
Has a network of centres in many locations throughout the UK. Provides free information about cancer and financial benefits. Also offers emotional and social support to people with cancer, their family, and friends.

Penny Brohn UK

Helpline **0303 300 0118**
www.pennybrohn.org.uk
Offers physical, emotional and spiritual support across the UK, using complementary therapies and self-help techniques.

Tenovus

Helpline **0808 808 1010**
www.tenovuscancercare.org.uk
Aims to help everyone in the UK get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, benefits advice and an online 'Ask the nurse' service.

General health information

Health and Social Care in Northern Ireland

www.northerntrust.hscni.net
Provides information about health and social care services in Northern Ireland.

NHS.UK

www.nhs.uk
The UK's biggest health information website.
Has service information for England.

NHS 111 Wales

111.wales.nhs.uk
NHS health information site for Wales.

NHS Inform

Helpline **0800 22 44 88**
www.nhsinform.scot
NHS health information site for Scotland.

Patient UK

www.patient.info
Provides people in the UK with information about health and disease. Includes evidence-based information leaflets on a wide variety of medical and health topics. Also reviews and links to many health-related and illness-related websites.

Stop smoking services

NHS Smokefree Helpline (England)

Tel **0300 123 1044**
www.nhs.uk/better-health/quit-smoking
Offers information, advice and support to people who want to stop smoking or have already stopped and do not want to start again.

Quit Your Way (Scotland)

Tel **0800 84 84 84**
www.nhsinform.scot/quit-your-way-scotland
Scotland's national stop smoking support service. Offers advice and information about how to stop smoking. You can also chat online to an adviser.

Help Me Quit (Wales)

Tel **0808 278 6119**
Text 'HMQ' to **80818**
www.helpmequit.wales
Offers information, advice and support on stopping smoking in English and Welsh.

Stop Smoking NI (Northern Ireland)

www.stopsmokingni.info
Has information and advice about stopping smoking. Also links to other support organisations for people in Northern Ireland who want to give up smoking.

Counselling

British Association for Counselling and Psychotherapy (BACP)

Tel **0145 588 3300**
www.bacp.co.uk
Promotes awareness of counselling and signposts people to appropriate services across the UK. You can also search for a qualified counsellor on the 'Therapist directory' page.

UK Council for Psychotherapy (UKCP)

Tel **0207 014 9955**
www.psychotherapy.org.uk
Holds the national register of psychotherapists and psychotherapeutic counsellors, listing practitioners who meet exacting standards and training requirements.

Emotional and mental health support

Mind

Helpline **0300 123 3393**
www.mind.org.uk
Provides information, advice and support to anyone with a mental health problem through its helpline and website.

Samaritans

Helpline **116 123**
Email **jo@samaritans.org**
www.samaritans.org
Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

Equipment and advice on living with a disability

British Red Cross

Tel **0344 871 1111**
www.redcross.org.uk
Offers a range of health and social care services across the UK, such as care in the home, a medical equipment loan service and a transport service.

Disability Rights UK

Tel **0330 995 0400** (not an advice line)
www.disabilityrightsuk.org
Provides information on social security benefits and disability rights in the UK. Has a number of helplines for specific support, including information on going back to work, direct payments, human rights issues, and advice for Disabled students.

Living Made Easy

Helpline **0300 999 0004**
www.livingmadeeasy.org.uk
Provides free, impartial advice about all types of disability equipment and mobility products.

Motability Scheme

Tel **0300 456 4566**
www.motability.co.uk
The scheme enables Disabled people to exchange mobility allowances they have as part of benefits (including the enhanced rate mobility component of Personal Independence Payment) to lease a new car, scooter or powered wheelchair.

Scope

Helpline **0808 800 3333**
Textphone Use Type Talk by dialling **18001** from a textphone followed by **0808 800 3333**
www.scope.org.uk
Offers advice and information on living with disability. Also supports an independent, UK-wide network of local Disability Information and Advice Line services (DIALs) run by and for Disabled people.

Support for LGBTQ+ people

LGBT Foundation

Tel **0345 330 3030**
lgbt.foundation
Provides a range of services to the LGBT community, including a helpline, email advice and counselling. The website has information on various topics including sexual health, relationships, mental health, community groups and events.

OUTpatients

www.outpatients.org.uk
A safe space for anybody who identifies as part of the queer spectrum and has had an experience with any kind of cancer at any stage. Also produces resources about LGBT cancer experiences. OUTpatients runs a peer support group with Maggie's Barts.

Support for carers

Carers Trust

Tel **0300 772 9600**
www.carers.org
Provides support, information, advice and services for people caring at home for a family member or friend. You can find details for UK offices and search for local support on the website.

Carers UK

Helpline **0808 808 7777**
www.carersuk.org
Offers information and support to carers across the UK. Has an online forum and can put people in contact with local support groups for carers.

Your notes and questions

Your notes and questions

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date, but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by members of Macmillan's Centre of Clinical Expertise.

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Thanks also to the people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **informationproductionteam@macmillan.org.uk**

Sources

Below is a sample of the sources used in our information about side effects of cancer treatment. If you would like more information about the sources we use, please contact us at **informationproductionteam@macmillan.org.uk**

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Can you do something to help?

We hope this booklet has been useful to you. It is just one of our many publications that are available free to anyone affected by cancer. They are produced by our cancer information specialists who, along with our nurses, money advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we are here to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.

5 ways you can help someone with cancer

1. **Share your cancer experience**
   Support people living with cancer by telling your story, online, in the media or face to face.

2. **Campaign for change**
   We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

3. **Help someone in your community**
   A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

4. **Raise money**
   Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

5. **Give money**
   Big or small, every penny helps. To make a one-off donation see over.

Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £
(Please delete as appropriate)

I enclose a cheque / postal order / Charity Voucher made payable to Macmillan Cancer Support
OR debit my:
Visa / MasterCard / CAF Charity Card / Switch / Maestro

Card number
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Valid from Expiry date
☐☐ ☐☐ ☐☐ ☐☐

Issue no ☐☐☐

Security number ☐☐☐

Signature

Date / /

Do not let the taxman keep your money

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

☐ I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made to Macmillan Cancer Support in the last 4 years as Gift Aid donations, until I notify you otherwise.

I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

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

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

If you would rather donate online go to **macmillan.org.uk/donate**

Registered with FUNDRAISING REGULATOR

Please cut out this form and return it in an envelope (no stamp required) to: Supporter Donations, Freepost RUCY-XGCA-XTHU, Macmillan Cancer Support, PO Box 791, York House, York YO1 0NJ

MACMILLAN
CANCER SUPPORT

This booklet is about the possible side effects of cancer treatment. It is for anyone who is having, or thinking about having, treatment for cancer.

The booklet explains some common side effects of cancer treatments. It also describes ways to manage them. Nobody will have all the side effects we mention, but some people may have more than 1.

At Macmillan we know cancer can disrupt your whole life. We'll do whatever it takes to help everyone living with cancer in the UK get the support they need right now, and transform cancer care for the future.

For information, support or just someone to talk to, call **0808 808 00 00** or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available. Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

Need information in different languages or formats? We produce information in audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

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