Information following treatment for early breast cancer

This leaflet provides information that will help explain what happens now that you have completed the main part of your treatment.

The completion of primary treatment, including surgery, radiotherapy and chemotherapy, does not mean the end of your support from the breast care nursing team. This is ongoing.
In this booklet we aim to provide general information about the purpose of follow up care. However, this booklet will not outline the specifics of the exact type of follow up care which has been decided for you. There are a number of approaches to follow up care and these do vary between different patients and hospitals for good reasons.

Please contact the breast care nurse office on 01422 222711, in order to discuss your concerns. If we cannot alleviate your concerns over the phone then we arrange for you to attend one of our drop in clinics.

What is the purpose of open access follow up?

- It provides you with an opportunity to raise concerns and ask questions.
- It allows health care staff to monitor your recovery, answer questions, record the outcome of your treatment and monitor any ongoing treatment you are taking.
- It may help in the organisation of surveillence follow up breast imaging

What follow up care does not achieve

It does not improve the chances of not developing secondary breast cancer (cancer that comes back somewhere else in your body) or allow secondary breast cancer to be detected at an earlier ‘curable’ stage.

It does not necessarily improve survival from breast cancer.

Although many patients feel reassured by routine hospital check ups, many find these visits to be worrying. Therefore, patient ‘well being’ may not be improved by hospital based follow up.

What checks will be made?

There are two main methods of checking for beast cancer:

Clinical breast examination

If you do attend a hospital clinic your doctor or nurse will examine your breast and the area under both arms. Although clinical examination is routinely performed it is unusual for any lumps to be detected that you were unable to feel yourself.

Mammography

The use of mammography (x-ray of the breast) can help detect recurrences of new cancers within the breast.

Unless you have had bilateral mastectomy you will be invited to have a mammogram on an annual basis for 5 years post diagnosis (Age dependant). If you have had a mastectomy or mastectomy and reconstruction you will be offered a mammogram of the other breast every year for 5-10 years. After that you can continue having mammograms once every three years in line with the National Health Service Breast Screening Programme and this is usually organised through your G.P.

If you have had a lumpectomy you will be offered a mammogram of each breast every year for 5-10 years. After that you can continue having mammograms once every three years in line with the National Service Breast Screen Programme and this is organised through your G.P.

The mammograms are interpreted by radiologists and if they detect any abnormality you will be recalled for further tests such as ultrasound or biopsy. A recall for further tests following a mammogram does not necessarily mean that the cancer has returned.

Although a normal mammogram is reassuring it does not preclude future problems and therefore it is essential to be breast aware and contact your breast team if you have any concerns.

What checks are not a routine part of follow up?

CT scan, x-ray and blood tests to try to identify whether breast cancer has spread beyond the breast are not performed as a routine part of follow up. Provided you are well with no symptoms of concern (see next page) tests such as these are not helpful for the following reasons:

Available tests are not able to detect small amounts of breast cancer cells which may be present. Thus ‘normal’ scans do not mean there will not be problems in the future.

Scans often identify benign innocent abnormalities which will never cause any problems, but in a patient previously treated for breast cancer, often cause a lot of worry and a need for further tests.

Waiting for results cause a lot of anxiety

Even if a blood test or scan identifies secondary breast cancer before it causes symptoms this in itself does not make the treatment any more effective. Early detection of secondary breast does not make it curable.

What to look out for?

Many women are cured of their cancer by the treatment they have received and live to an old age without any cancer related problems. You will get normal coughs and colds, aches and pains. As you will be aware you are also likely to experience at least some effects from the treatment you have received.

Following surgery and radiotherapy:

- Pain in the treated area
- Rib tenderness
- Skin changes
- Under arm numbness
- Decreased shoulder movement
- Breast swelling if you have had a lumpectomy

Following chemotherapy or as a result of hormonal drugs:

- Fatigue
- Premature menopause
- Chemotherapy related peripheral neuropathy

Some symptoms may cause anxiety and concern. Many will be nothing to worry about but if you experience any of the symptoms listed below you should bring them to the attention of your doctor or contact your breast team.

- Pain which last more than 3-4 weeks
- Unexplained lumps and bumps anywhere in your body

If you have any comments about this leaflet or the service you have received you can contact :

Nurse Specialist Team
The Macmillan Unit, Calderdale Royal Hospital
Telephone No: (01422) 222711

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں.

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