Emotions and Cancer
A guide for people with cancer, their families and friends

For information & support, call
131120
This booklet has been prepared to help you understand more about the emotional impact of cancer.

A cancer diagnosis is a life-changing event. We hope this booklet will help you understand the range of reactions that people may have. It offers suggestions for adjusting to the diagnosis and coping during and after treatment, as well as information about support services.

As a cancer diagnosis affects not only you, but also your family and friends, this booklet provides practical tips on how to talk to others about cancer and how they can help.

This booklet does not need to be read from cover to cover – just read the parts that are useful to you. You may also like to pass this booklet to your family and friends for their information.

**How this booklet was developed**

This information was developed with help from a range of health professionals and people affected by cancer. It is based on clinical practice guidelines for the psychosocial care of people diagnosed with cancer.¹⁻³
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Most people will experience strong emotions after a cancer diagnosis, not only when they first hear that it’s cancer, but also at various times during and after treatment.

Cancer is a serious disease, the treatment may take a long time and can be demanding, and there are many periods of waiting and uncertainty. There is no right way to feel – experiencing a range of emotions is normal. The intense feelings may be constant, or

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<th>Challenging times</th>
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<tr>
<td><strong>Diagnosis</strong></td>
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<tr>
<td>When you are diagnosed with cancer, it is often difficult to take in the news immediately – you might hear the words, but not be able to absorb them or believe them. Most people feel overwhelmed at first.</td>
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| **Treatment decisions** |
| The weeks after diagnosis can be very stressful. You may feel like everything is happening too fast – or too slowly. People often feel confused and anxious about treatments and side effects. You may wonder if you will be the same person as before and how your life will change. |

| **During treatment** |
| Cancer treatments can be physically demanding and disrupt all your usual routines. You may also need to deal with practical issues such as travelling to treatment, paying for tests and treatment, getting time off work, and family responsibilities. |
they may come and go. You may find that some pass with time, while others last longer. At times, it may feel like you’re on an emotional roller-coaster.

Everyone is different, and you need to deal with the diagnosis in your own way. As you navigate this challenging time, it may be reassuring to know that your reactions are natural, there are different ways to manage the emotional impact, and support is available.

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### Treatment side effects

The physical and emotional impacts of cancer are linked. Side effects of treatment can make it harder to cope emotionally, while emotional distress may make the physical side effects worse. The good news is many side effects can now be well managed if you tell your treatment team.

### After treatment

Many people are puzzled to find that their mood doesn’t improve as soon as treatment finishes. This can be a time of adjustment as you reassess priorities and come to terms with any long-term impacts of treatment. It is common to feel concerned about the cancer coming back, especially when you have follow-up tests.

### Advanced cancer

It can be devastating to be told that the cancer is advanced at first diagnosis, or that it has returned after the initial treatment. If this is the case for you, you and your carers may find it helpful to see a professional counsellor or call Cancer Council 13 11 20. You could also read our booklet *Living with Advanced Cancer*. 

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Common reactions

At any stage after a cancer diagnosis, you may experience times of distress and feel a range of strong emotions, such as disbelief, fear, sadness, anxiety and anger. These can be seen as a type of grief – cancer often involves a series of losses, such as the loss of good health, temporary or permanent changes to your appearance, not being able to work or do your normal activities, changed financial plans, a loss of independence, changed relationships, and a shift in how you see yourself. It usually takes time to adjust to these changes.

When your mental health needs are met, you are in the best position to manage the demands of treatment. Let your treatment team know if you have a history of anxiety or depression, as this could make you more vulnerable now. It is important to manage emotional distress and seek professional support if it is ongoing (see pages 35–37).

Many people say that their experience after a cancer diagnosis also includes feelings of hope and connection. For some, it can be a time of reflection and lead to new goals and priorities.

Shock and disbelief

The first reaction to a diagnosis is often shock – you may feel numb, as if you aren’t feeling any emotion. It may take time to accept that you have cancer, especially if you don’t feel sick. This numbness can protect you as you gradually come to terms with the diagnosis.

However, some people may never fully accept the diagnosis. Over time, denial can make it difficult to accept the demands of treatment, so always discuss your views with your cancer specialist.
Fear and anxiety

Cancer treatments and outcomes have dramatically improved in recent years, but it can still be very frightening to hear the word “cancer”. It’s natural to worry about the treatment, side effects, test results and the long-term outcome, as well as the impact that the diagnosis will have on your family, work and other responsibilities.

Most people cope better when they learn more about the diagnosis and treatment options and when they develop a plan for how they will manage the practical issues. The period before each new treatment begins may be particularly stressful, but many people find that they feel calmer once treatment is underway.

In times of stress, your body releases adrenaline, your heart beats faster, your blood pressure goes up, your breathing is shallow and rapid, your hands get sweaty, and your mouth gets dry. These natural reactions are part of the “fight or flight” response to danger, allowing people to react quickly to a sudden threat. For most people, these feelings settle, but for others they can cause panic attacks (see box, next page) or they may be ongoing. This can lead to anxiety that affects your thoughts and may make you irritable and short-tempered. For ways to reduce stress and anxiety, see pages 20–21.

For more insights on emotions and cancer, you can listen to The Thing About Cancer, a podcast from Cancer Council available at cancercouncil.com.au/podcasts. Hear experts discuss all things cancer, including how to cope with the diagnosis and manage fear.
Anger, guilt and blame

It is common to ask “why me?” You may feel angry with your family or friends, health professionals, the world, or even yourself if you think you may have contributed to the cancer or a delay in diagnosis. Perhaps you’re angry that you did everything right and still got cancer.

Cancer often does not cause any symptoms in the early stages, or it may cause symptoms that are more likely to be explained by other conditions. This means it can take some time to get a diagnosis. It is natural to try to work out why the cancer started. However, even though we know the risk factors for some cancers, not everyone with risk factors will get cancer, so there is an element of chance. If you are blaming yourself, try to remember that no-one deserves cancer.

Panic attacks

For some people, severe anxiety or fear can lead to panic attacks. These might happen in a particular situation, such as having a test in an enclosed space or before a medical procedure, but sometimes there is no clear single trigger.

A panic attack can happen suddenly and be very alarming. It can include symptoms such as shortness of breath, racing heartbeat, dizziness, sweating, shaking, chest pain, a choking feeling and overwhelming fear. In a panic attack, these sensations may be intense, but will normally peak and pass within a few minutes. However, they can also be symptoms of heart attack and other serious health conditions, so call 000 if they occur unexpectedly, do not pass quickly, or if you are unsure. If you experience panic attacks, it is important to talk to your doctor about ways to manage them.
People diagnosed with cancer often say that their greatest concern is for the people they love, that they feel guilty about putting them through such a stressful experience. It may be helpful to share your feelings with someone neutral, such as a counsellor (see page 36).

**Sadness**
Feeling sad after a cancer diagnosis is common. It is a natural response to loss and disappointment. You may be sad about the way cancer has changed your day-to-day life, your body, or your plans for the future. If you have continued feelings of sadness, have trouble getting up in the morning, or have lost motivation to do things that previously gave you pleasure, you may be experiencing depression (see page 35).

**Loneliness**
Cancer can be isolating, even with many people to support you. You might feel lonely if your family and friends have trouble dealing with your diagnosis, or if you are too sick to work or socialise with others and enjoy your usual activities. This might be the time to connect with other people going through a similar experience (see page 34).

**Loss of control**
Being told you have cancer can be overwhelming and you may feel that your emotions are out of control. It may also seem that you are losing control of your life – some people say they feel helpless or powerless. This can be very difficult, especially if you are used to being independent or being the one who takes care of everyone else.
**Physical side effects and emotions**

The physical and emotional effects of cancer and cancer treatment can interact with each other. Let your team know if you have any new or ongoing side effects.

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<tr>
<th>Side Effect</th>
<th>Description</th>
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<tr>
<td>pain and fatigue</td>
<td>Cancer does not always cause pain, but if it does, there are now many treatments available to relieve it. The most common treatment side effect is fatigue, feeling exhausted and lacking energy for day-to-day activities. Fatigue differs from normal tiredness as it often doesn’t go away with rest or sleep. This feeling can also be a symptom of depression. ▶ See our <em>Overcoming Cancer Pain</em> booklet and listen to our “Managing Cancer Pain” and “Managing Cancer Fatigue” podcasts.</td>
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<tr>
<td>appetite changes</td>
<td>Your appetite might change if you feel unwell, anxious or depressed, or because of the physical effects of cancer treatment. Some people lose their appetite, while others find they eat more. A change in your appetite or weight can make you feel distressed. ▶ See our <em>Nutrition and Cancer</em> booklet and our fact sheets on mouth health and on taste and smell changes, and listen to our “Appetite Loss and Nausea” podcast.</td>
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<tr>
<td>appearance changes</td>
<td>Cancer treatments can cause changes to your appearance, such as hair loss or loss of a body part. Whether these changes are temporary or permanent, they can change the way you feel about yourself (your self-esteem) and make you feel self-conscious and less confident. ▶ See our <em>Hair Loss</em> fact sheet, and call 13 11 20 to find out about wig services. You can also contact Look Good Feel Better on 1800 650 960 or at lgfb.org.au for a free workshop on appearance-related side effects.</td>
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Certain cancer treatments directly affect the body’s sexual organs or hormone balance. However, any cancer treatment can reduce your interest in sex. You may feel tired and unwell, or you may be too worried to think about sex. You might also feel less confident about your body. A low sex drive (libido) can also be a symptom of depression. Libido often improves after treatment finishes, but for some people the effect is ongoing.

> See our *Sexuality, Intimacy and Cancer* booklet and listen to our “Sex and Cancer” podcast.

Some cancer treatments affect the reproductive organs, which may lead to temporary or permanent infertility. This means it may no longer be possible to conceive a child. You may feel devastated if you are unable to have children, and may worry about the impact of this on your relationship or future relationships. Even if your family is complete or you were not planning to have children, you may feel distress.

> See our *Fertility and Cancer* booklet.

Some people diagnosed with cancer notice changes in the way they think and remember information. This is often called “chemo brain”, but it can happen even if you don’t have chemotherapy. It is also known as “cancer fog” or “cancer-related cognitive impairment”. These changes are usually temporary and get better with time, but can have a big impact on your emotional wellbeing.

> See our *Understanding Changes in Thinking and Memory* fact sheet or listen to our “Brain Fog and Cancer” podcast.
Finding hope

In Australia, the rates of cancer survival have increased significantly over time, but it can be hard to feel hopeful when you have just been diagnosed with cancer. Worrying about the future is natural. Treatments are improving constantly, and if the cancer can’t be controlled, symptoms can be relieved to make life more comfortable. It can be very confronting to think about your own mortality, even if the outlook for your type of cancer is reassuring. Talk to your doctor about what the diagnosis means for you and what the future may hold. Knowing more about the illness may help ease this fear.

If you’ve been told the cancer is advanced, you may find it harder to feel hopeful. In some cases, advanced cancer can be controlled for many years. When time is limited, people often focus on goals such as visiting special places or spending time with family and friends.

Does thinking positively help?

A common belief is that people with cancer need to stay positive. While it can help to be hopeful, this doesn’t mean denying the reality that cancer is serious or frightening. Trying to put on a brave face all the time drains energy, and generally doesn’t work well because the negative thoughts just keep coming back. Pressure to be positive can lead to people being afraid to discuss fears and feelings, which can make problems worse.

Try to be realistic about what is happening, and talk to someone about your fears and concerns and how you feel you are coping. Explaining how you feel to those around you may also help you get the support you need.
Most of us have various ways of coping with difficult situations, which we have learned over time. These could include:

- seeking more information
- trying to fix the problem
- having a laugh to feel better
- trying to be strong and “soldiering on”
- distracting ourselves from unhelpful thoughts and feelings
- talking things through to try to make sense of what is happening.

How you cope depends on the type of situation you are facing, past experiences, your personality, upbringing and role models. It is important to think about what has worked for you in the past, but accept that after a cancer diagnosis you might need more than your usual ways of coping. There is no best or right way of coping, but having a few strategies may help you feel more in control.

Some coping strategies are less helpful, however. Many people go back and forth between denial and acceptance as they come to terms with a cancer diagnosis. When denial is ongoing, it can become hard to make decisions about treatment, or it could mean you avoid treatment or follow-up appointments. Some people use alcohol and drugs to cope with stressful situations. These may appear to provide relief in the short term, but can cause emotional and physical harm and could affect how well the cancer treatment works.

If you think you might be in denial or starting to rely on alcohol or drugs to cope, it is important to talk to your cancer care team about getting professional support. With the right help, it is possible to learn new ways of coping.
Tools for coping

A coping toolbox is a set of strategies or “tools” you can use to help you cope with a cancer diagnosis and treatment. Each person’s toolbox will look different, but it’s useful to consider a range of strategies. Some of these are ways to solve particular problems; others aim to enhance your general wellbeing during this stressful time.

Find out what to expect
Information about the diagnosis and treatments can help you make decisions and plan ahead, and may make you feel more secure. See pages 18–20.

Eat and drink well
Eating healthy food and drinking plenty of water will help your body cope with physical and emotional stress, but this can be challenging when you are feeling unwell. Talk to a dietitian and see our Nutrition and Cancer booklet for tips.

Be active
Research has shown that regular physical activity can help with feelings of anger, stress, anxiety and depression. It can also help manage fatigue and improve sleep. Even a short daily walk offers benefits. See our Exercise for People Living with Cancer booklet.

Seek support
Share your concerns with a family member or friend, or with your general practitioner (GP), nurse, social worker or psychologist. Other options include calling Cancer Council 13 11 20, visiting the Online Community at cancercouncil.com.au/OC, or joining a support group. Accepting help with practical tasks such as shopping or housework may also make it easier to cope. See pages 32–40 for more sources of support.
Clear your mind
Complementary therapies, such as relaxation, yoga and counselling, may increase your sense of control, decrease stress and anxiety, and improve mood. See pages 20–21 for more information.

Take a break
Make time each day just for relaxation and enjoyment. Think about things that help you to relax and feel good, such as listening to music, reading, taking a bath or having a massage. Keeping in touch with the world through work, hobbies, or time with family and friends may help you see a life outside of cancer and provide a break from your worries.

Sort out issues
A cancer diagnosis can cause or add to financial problems, work-related issues, accommodation difficulties, relationship concerns and family stresses. There is support available – talk to the hospital social worker or call Cancer Council 13 11 20.

Draw on spirituality
Some people find meaning and comfort from their faith and spiritual beliefs. Others may experience spirituality more generally. A cancer diagnosis can challenge the beliefs of some people. It may help to talk about your feelings with a spiritual care practitioner or religious leader.
Gathering information

Once diagnosed, there is a lot of information to take in – and well-meaning family and friends may give you even more. This “information overload” can leave you overwhelmed and confused about what to do. You may only need information that is relevant to your situation right now or a way of dealing with the information you already have.

Look for reliable information – Make sure your information comes from recognised cancer experts and is based on evidence. Cancer Council has booklets, online information and podcasts about different cancer types, treatments and issues. Some information on the internet is not trustworthy – see pages 40–41 for a list of reliable websites.

Ask questions – If you are unsure or confused about certain information, it can help to talk to your treatment team. Write down your questions beforehand (see page 42 for some suggestions) and put them in order of how important they are right now. You can also call Cancer Council 13 11 20 to discuss your concerns.

Involve other people – Ask people you trust to help gather and make sense of new information. You could also choose a close family member or friend to come to your appointments with you. Let them know if you’d like them to take notes and/or join in the discussion.

Find out about suitable clinical trials – Your doctor or nurse may suggest you take part in a clinical trial. Doctors run clinical trials to test new or modified treatments to see if they are better than current methods. Over the years, trials have led to better outcomes for people with cancer. You can find trials online at australiancertrials.gov.au.
**Get organised** – Start a filing system for all your test results, information and records. You also have the option of using My Health Record, an online system provided by the Australian Government – visit myhealthrecord.gov.au to find out more.

**Keep a diary** – You can use a paper diary or smartphone app to keep track of appointments and side effects, and highlight missing information. This will also be a useful record in the future (especially if you are seeing different professionals in different locations).

**Update your affairs** – Many people with cancer review their superannuation and insurance policies, and update their will and other legal documents. This doesn’t mean you have given up hope – everyone needs to do these things at some point and you might feel relieved once they are done.

**Find support** – There are many ways to connect with other people in a similar situation. Cancer Council runs face-to-face and telephone support groups, or can put you in touch with someone who has had a similar cancer experience. You could also join our online discussion forum at cancercouncil.com.au/OC. See page 39 to find out more about support from Cancer Council.

The first thing is, I found it useful to read fact-based articles about the cancer I had. The second thing was doing physical activity that needs a high degree of concentration. And the third thing was talking in a peer group. I found those three things very useful in managing fear. 

*Matt*
Making decisions

After a cancer diagnosis, you will probably need to make a number of decisions. These could include which treatments to have, how to involve or care for your family and friends, whether or when to return to work, and what to do about finances.

Know your options – Understanding the disease, the available treatments, possible side effects and any extra costs can help you weigh up the options and make well-informed decisions.

Take your time – Check with your specialist how soon treatment should begin. If it is safe to wait a while, use that time to think about your decisions. Generally, people find it easier to make decisions (and have fewer regrets later) if they take time to gather information and think about the possible consequences.

Get expert advice – Ask your health professionals to clearly explain your treatment options, and the benefits and side effects of each. Social workers can advise you and your carer about non-medical concerns such as financial assistance, how to get extra help at home, and support for relationship or emotional difficulties. You can also call Cancer Council 13 11 20 for information and support.

Write it down – Organising your thoughts on paper is often easier than trying to do it in your head. Start by identifying the purpose of the treatment (is it to cure the cancer, to control it or to be as comfortable as possible?), then list the pros and cons of each treatment option. You could rate how important each point is on a scale of 1–5, considering the short-term and long-term effects on you and others.
Talk it over – Discuss the options with those close to you, such as your partner, family members and close friends. You may feel worried about how your decisions will affect them, so hearing their opinions could put your mind at rest. Sometimes, however, you might prefer to talk to someone neutral, such as a member of your treatment team or one of the health professionals at Cancer Council 13 11 20.

Consider a second opinion – Some people ask for a second opinion from another specialist to confirm or clarify their specialist’s recommendations or just for reassurance that they have explored all the options. Specialists are used to people doing this. Your GP or specialist can refer you to another specialist and send your initial results to that person. You can get a second opinion even if you have started treatment or still want to be treated by your first specialist. You might decide you would prefer to be treated by the second specialist.

Use a decision aid – Decision aids are online or printed resources that help you choose between treatment options by answering a series of questions and focusing on what matters most in your own case. There are decision aids for certain cancer-related issues (e.g. whether to have breast reconstruction) – ask your treatment team if a decision aid is available for your situation.

Expect to experience doubts – Being unsure does not mean you have taken the wrong path. Reassure yourself that you made the best decisions you could with the information you had at the time. Asking yourself, “Did I make the right decisions?” is rarely useful. Also, decisions are not always final – it may be possible to change your mind even after you have already started down a particular treatment path.
Remember it’s your decision – Adults have the right to accept or refuse any treatment that they are offered. For example, some people with advanced cancer choose treatment that has significant side effects even if it gives only a small benefit for a short period of time. Others decide to focus their treatment on quality of life. You may want to discuss your decision with the treatment team, GP, family and friends. See our Cancer Care and Your Rights booklet.

Using complementary therapies
Complementary therapies, such as relaxation, meditation, counselling and art therapy, are widely used alongside conventional cancer treatments such as surgery, chemotherapy and radiation therapy. Many complementary therapies focus on a mind–body connection. They may offer physical, emotional and spiritual support, help reduce side effects from medical treatment, and improve quality of life.

Relaxation and meditation – These therapies can help reduce stress, anxiety and fatigue, and improve quality of life.
- Relaxation usually includes slow breathing and muscle-loosening exercises to physically and mentally calm the body.
- Meditation involves focusing on a single thing, such as breathing, to clear the mind and calm the emotions.
- Mindfulness meditation helps you to take things one day at a time. It allows you to focus more easily on the present, rather than worrying about the past or fearing the future.
- Body-based practices such as yoga, tai chi and qi gong combine a series of movements with breathing and meditation exercises to improve strength and flexibility while reducing stress and anxiety.
**Counselling** – Through discussions with a counsellor, social worker or psychologist, you can identify problems and explore ways of resolving unhelpful thoughts and feelings that affect your health and day-to-day life. Counselling allows you to express your emotions in a safe and supportive environment, and to learn new coping skills. It can provide an opportunity to talk about thoughts and feelings that you might not feel comfortable sharing with family and friends.

**Art therapy** – This technique uses visual art (drawing, painting, collage, sculpture or digital work) to express feelings. It can be done individually or in groups, and some hospitals run programs. You do not need artistic talent to participate or benefit – the focus is on the process of producing artwork, not the end result. An art therapist helps you explore the images you have created to encourage understanding of your emotions and concerns.

Let your doctor know about any complementary or alternative therapies you are using or thinking about trying. Some may not be appropriate and could be harmful with some medical treatments. See our *Understanding Complementary Therapies* booklet, or listen to our meditation and relaxation recordings (available as free CDs or online).

Alternative therapies are therapies used instead of conventional medical treatments. These are unlikely to be scientifically tested and may prevent successful treatment of the cancer. Cancer Council does not recommend the use of alternative therapies as a cancer treatment.
Managing your thoughts

People affected by cancer may find themselves going over and over the same distressing thoughts about the past, present or future. Ignoring such thoughts or trying to distract yourself may work at first, but they often return once you are no longer distracted – for example, during the night or early in the morning. The strategies listed below may be a helpful starting point if you are finding it hard to manage your thoughts.

Identify where the thoughts come from – Ask yourself if your thoughts are the result of an underlying belief, such as “The world should be a fair and just place”, “If I can’t do everything I used to do, I am useless” or “I am a burden to my family and friends”. Or perhaps you have a tendency to give personal meaning to everything that is happening, even to events that are beyond your control. For example, if you arrive at the treatment centre and can’t find a parking spot, you might think, “Nothing ever goes right for me. I don’t know why I’m bothering with the treatment, I know it won’t work”.

Consider your own advice – Think of someone you love and imagine what you would say to them if they felt the same way.

Check your thoughts – Ask yourself if you are jumping to conclusions or exaggerating the negatives. If so, is there something you can do to change the situation or improve it?

Write down your thoughts – This helps slow down your thinking and makes it easier to focus. It may also help you work out if a thought is based on facts, realistic or helpful.
Recognise the little positives – Some days it might be hard to find something positive. This is understandable, but if you feel like that every day, check whether you are ignoring any little achievements or happy events. Some people make a habit of writing down three good things that have happened to them each day. These don’t have to be major life events – they could just be an encouraging smile from a radiographer or a nice chat with a receptionist on a tough day.

Practise letting your thoughts come and go – Thoughts are fleeting. Some we notice and many we don’t. Try to let your thoughts come and go without getting caught up in them. Cancer Council’s free meditation recording may help you practise this.

Be kind to yourself – Use encouraging thoughts to talk yourself through difficulties, rather than undermining yourself. This does not come naturally to everyone, but counsellors and psychologists can teach you some techniques.

Seek professional help – Social workers, psychologists and other health professionals are trained to help people manage how they’re feeling. Check what support is available at your treatment centre, or ask your GP for a referral. See pages 36–37 for more information.

Some people find online self-help programs or smartphone apps useful for tracking how they’re feeling. Visit moodgym.com.au or mindspot.org.au, or see the list of health and wellbeing apps at healthdirect.gov.au/health-and-wellbeing-apps.
Improving sleep

Sleep can help your body cope with the physical and emotional demands of cancer treatment. You may find your sleep is affected by worry, pain (e.g. after surgery), nausea, hormonal symptoms (e.g. hot flushes), and some medicines (e.g. steroids). If you aren’t as physically active during treatment, your body may not be as tired and you could find it harder to sleep. Feeling sad or depressed can also make it difficult to sleep well at night.

Ways to improve sleep

- Go to bed and get up at the same time every day.
- Do some physical activity every day, but avoid exercising two hours before going to bed.
- Put screens (mobile phone, tablet, computer or TV) away an hour before bedtime and do something relaxing – have a bath, read, listen to music or drink a glass of warm milk.
- Avoid coffee, tea, chocolate and cola after early afternoon.
- Avoid alcohol before bed. It may seem to help you relax and fall asleep, but it can keep you in the lighter sleep stages and rob you of deep sleep.
- Don’t eat big meals late at night as indigestion can interfere with sleep.
- Try not to sleep during the day. If you can’t stay awake, limit naps to 30 minutes.
- Use relaxation practices, such as Cancer Council’s relaxation recording, before bed.
- Keep your bedroom dark, cool and quiet.
- If you can’t sleep, get up and sit on the couch until you feel sleepy again. Avoid turning on bright lights, TV or reading, as these may wake you up more.
- Listen to our “Sleep and Cancer” podcast.
The others in your life

It can be difficult to tell people you have cancer. You may feel uncomfortable talking about personal matters, or unsure how family and friends will react. Although you might want to protect the people you care about, sharing the news can often bring you closer together.

It’s up to you how much detail to share and when to share it, but hiding your diagnosis probably won’t work. Sooner or later, family, friends and colleagues will find out that you have cancer, either by hearing about it from others or through changes in your appearance. Telling people can help prevent misunderstandings, put you in control of what information is given out, and allow people to offer support.

At times it may feel like nobody understands what you’re going through. Try not to shut others out – you may find that talking about cancer is not as difficult as you had first thought.

How to tell family and friends

When you feel ready, decide who to tell and what to say. To prepare for these conversations, you could:

• choose a quiet time and place, if possible
• think of answers to likely questions (but only answer if you want to – you don’t have to share every detail)
• accept that the person you are telling may get upset – in some cases, you may find yourself comforting them, even though you are the one with cancer
• get help finding the right words – for example, you could meet with the hospital social worker or call Cancer Council 13 11 20 to talk through what you might say.
People usually don’t mean to make things worse. Their reactions are likely to come from their own difficulties in handling feelings such as fear and anxiety, or from uncertainty about what to do or say. Dani

Other people’s reactions
The reactions from your family and friends will depend on many factors, including their previous experience of cancer and their own coping styles. Sometimes people respond in ways that may make you feel hurt, angry or frustrated. These may include:

Becoming very distressed – People often have a strong emotional reaction to the word “cancer”, but they may not be aware that treatments and outcomes are improving all the time.

Saying the wrong thing – People often don’t know what to say. They may appear too positive or make light of your situation, or may even say something inappropriate or ill-informed. Try not to take their initial reactions as a sign that they don’t care. They may need as much information, support and advice as you do. They might be fearful of losing you, frustrated they can’t do anything about the disease, or worried about how the illness will change their lives.

Giving unhelpful advice – In their keenness to help, people might offer confusing advice or want you to try new “miracle cures” that aren’t evidence-based. Let them know that you are making treatment decisions based on discussions with your medical team. Explain that every cancer is different and you need to follow the advice of experts.
Withdrawing from you – Some friends may seem to avoid you – they might feel like they can’t cope with what you’re going through. If you think not knowing what to say is keeping a friend from visiting, call them to ease the way. You may find that talking openly about the illness and treatment helps everyone.

Give your family and friends time to adjust to the diagnosis. After the initial shock, most people will be supportive.

How to manage misunderstandings
After a cancer diagnosis, communication becomes even more important in your relationships. If you feel hurt by the reaction of someone close to you, a conversation may help clear the air:

• Find time to talk. Don’t wait for the “right” time – it may never come.
• Be honest about what you are thinking and feeling, even if it is upsetting.
• Focus on understanding each other – at least initially, this is more important than trying to solve the problem.
• Really listen to what the other person is trying to say and try to understand where they are coming from.

In some cultures, cancer may be seen as contagious, sent to test you, caused by bad luck or always fatal. People may not want to talk about it openly and may not want to use the word “cancer”. If it is hard to talk about cancer within your community, you could call Cancer Council 13 11 20 for another source of confidential support.
Ways to share how you’re feeling

Your own physical health and emotions could change during and after your treatment. It may be hard to let your friends and family know how you’re feeling, and they may find it hard to ask. Sometimes you will switch between wanting to talk about what’s going on and wanting to avoid difficult thoughts and feelings. It is okay to say no – whether it is about discussing your personal concerns or in response to an offer of help.

Repeating the same information to everyone in your network can be draining, and you may not always feel up to taking phone calls or seeing visitors. It can be helpful for one family member or friend to act as the main point of contact. They can answer enquiries, monitor calls, or keep visits to more suitable times. You could also leave a message on your voicemail or answering machine giving a quick update; send text messages or emails; or share updates through social media, such as a closed Facebook group or apps (see page 32).

If you are having trouble expressing how you are feeling, you could try keeping a journal or blog, or you may prefer to make music, draw, paint or craft. You can choose whether to share your writing or artworks with those close to you or to keep them for yourself.

Telling children

When you are diagnosed with cancer, one of your concerns might be how to tell your children, grandchildren or other young people in your life. Talking to young kids or teenagers about cancer can feel difficult and overwhelming.
Parents and other adults can feel overcome by their own anxiety and fears, and their first impulse may be to protect children from feeling these same strong emotions. Some parents avoid telling their children they have cancer. Others wait until treatment starts and side effects, such as hair loss or nausea, are noticeable.

Most children sense that something is wrong even if they don’t know what it is. When they are not told what is going on, children may imagine the worst. They may also find out from someone else, and this may leave them feeling angry and confused.

When someone close to them is diagnosed with cancer, children usually cope better if they are told in a way that is appropriate for their age and stage of development. With planning, practice and support from family or health professionals, most parents and other adults are able to talk to kids about cancer.

Older children may worry about burdening you with how they are feeling, so make sure they have a trusted person outside the immediate circle who they can talk to about the situation.

> See our Talking to Kids About Cancer booklet and “Explaining Cancer to Kids” podcast for ways to tell children and how to help them cope at different stages.
For most people, the cancer experience doesn’t end on the last day of treatment. Life after cancer treatment can present its own challenges. You may have mixed feelings when treatment ends, and worry that every ache and pain means the cancer is coming back. People often feel safer when they are closely monitored by the treatment team and may feel a bit lost when they don’t see them as often.

Some people say that they feel pressure to return to “normal life”, but they are still processing the diagnosis and treatment and dealing with side effects. You may feel a range of emotions for some time.

It is important to allow yourself time to adjust to the physical and emotional changes, establish a new daily routine at your own pace, and seek support if you need it. Your family and friends may also take time to adjust.

Cancer Council 13 11 20 can help you connect with other people who have had cancer, and provide you with information about the emotional and practical aspects of living well after cancer.

▶ See our *Living Well After Cancer* booklet.

> After my treatment, a psychologist explained that it’s common to feel like you’ve had the rug pulled out from underneath you after a major trauma. It’s also common to question your view of the world and your beliefs. Knowing that, and how normal it is, helped tremendously.  

David
Worrying about cancer coming back

Many people feel anxious and frightened about the cancer coming back (recurrence), especially in the first year after treatment finishes. For some people, this worry may affect their ability to enjoy life and make plans for the future.

Some people say that with time their fears lessen, but the worry often returns at particular times, such as before any follow-up appointments, tests and scans; special occasions (e.g. birthdays or holidays); anniversaries of the date they were diagnosed, had surgery or finished treatment; and when they read or hear of someone else’s experience with cancer.

Ways to manage the fear of recurrence

- Talk to a medical professional about your risk of recurrence.
- Focus on what you can control – for example, being involved in your follow-up appointments and making changes to your lifestyle.
- Recognise the signs of stress, such as a racing heartbeat or sleeplessness, and manage these in a healthy way. For example, you could try meditation, relaxation or light exercise.
- Join a support group to discuss your concerns with other people who have had cancer. Ask your treatment centre or call Cancer Council 13 11 20 to find out about face-to-face, online and telephone support groups.
- Speak to a counsellor if the fear of recurrence is overwhelming. The counsellor may be able to help you balance your thinking or have a more helpful frame of mind.
Getting support

Even though family and friends can be there to help, many people still find it hard to ask for, and then accept, support. When you are dealing with treatment and side effects, your support network can make an enormous difference. Family and friends usually appreciate being allowed to provide support – it helps them feel useful. Some people don’t have family and friends who are willing or able to help, but there are also many sources of professional support.

Offers of help

People are often willing to help if they know what you need. Family and friends can support you in different ways. Some people will be able to talk about the cancer and comfort you if you are upset. Other people may prefer to offer practical support. If you have a partner or another person providing most of your care, an important role for other family and friends may be to support that carer.

Some people like to use an app on their smartphone or computer, such as CanDo (candoapp.com.au), LOVLIST (lovlist.org) or Caringbridge (caringbridge.org). These apps allow you to list tasks and set up a roster so people can choose activities that match their abilities and interests. They can also be a convenient way to share updates with your social circle.

Talking to a counsellor made me realise I don’t have to go it alone. We have good friends and a great community who will support me. I just needed to be able to step back and see the possibilities.  

Kate
Ways family and friends can help

The suggestions below may be a useful prompt when people say, “Let me know if you need anything.”

### Providing practical support
- preparing meals
- doing household chores
- going grocery shopping
- driving you to appointments
- sharing an after-school roster
- helping you exercise

### Keeping others informed
- screening calls and emails
- acting as the main point of contact
- coordinating offers of support
- updating social media

### Offering companionship
- keeping you company
- listening without trying to solve your problems

### Keeping you involved
- getting you out and about
- talking about other things aside from cancer

> For more tips, visit cancercouncil.com.au/podcasts and listen to our podcast “How to Help Someone with Cancer.”
Other sources of support

It’s not unusual for people to find themselves alone at some points in their life. Having a serious illness when you feel that you have no close family or friends can be especially hard, but you don’t have to try to cope by yourself. The hospital social worker can link you with local services. Other sources of support could include not-for-profit organisations, including Cancer Council and cancer-specific groups (such as Breast Cancer Network Australia and Prostate Cancer Foundation of Australia), and faith-based groups. If you have children, formal or informal school-based assistance, such as the school counsellor, may be available. See pages 38–39 for various sources of practical and financial assistance.

If you want to talk about the diagnosis or how you’re coping with treatment and side effects, you may want to connect with a support group, either in person, over the phone or online. You may feel supported and relieved to know that others understand what you are going through and that you are not alone.

In a support group, people often feel they can speak openly and share tips with others who have gone through a similar experience. You may find that you are more comfortable talking about your diagnosis and treatment, your relationships with friends and family, and your hopes and fears for the future. Some people say they can be even more open and honest in these support groups because they aren’t trying to protect those close to them.

To find out which support groups are available in your area, call Cancer Council 13 11 20 or ask your nurse or social worker.
When do you need professional support?
While everyone with cancer experiences distress at some point, it can be difficult to know if how you are feeling is a typical reaction or something more serious. If you talk to a health professional about your concerns, they are likely to use a standard method to measure how you are feeling. For example, you may be asked to rate your distress over the past week on a scale of 0 to 10 and complete a checklist of problems.

Warning signs
At any stage after a cancer diagnosis, it is natural to have days when you feel sad or worried. Sometimes, however, a person may begin to feel “stuck” in their distress and become very depressed or anxious. If this is the case for you or someone you care about, it is important to seek help. You may need to seek professional help if you:
- find it difficult to function on a daily basis
- have lost the desire to do things that previously gave you pleasure
- find you are feeling depressed most of the day, nearly every day
- begin to rely on alcohol or drugs
- stop eating regularly
- are sleeping too much or having a lot of trouble sleeping
- are worried you might hurt someone because of your anger
- think about self-harm or taking your own life.

Anxiety and depression are quite common among people who have had cancer, but there is no need to face this experience alone. Talk to your cancer care team or GP, as counselling or medicine – even for a short time – may help. You can also call Cancer Council 13 11 20, or get in touch with beyondblue on 1300 22 4636 or at beyondblue.org.au. For 24-hour crisis support, call Lifeline 13 11 14 or visit lifeline.org.au.
### Health professionals who can help

<table>
<thead>
<tr>
<th>Professional</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td><strong>GP</strong></td>
<td>Your GP can assist you with treatment decisions and works in partnership with your specialists in providing ongoing care. They can refer you to other health professionals for support with managing emotions or thoughts. Check with your GP whether you can access Medicare rebates for sessions with a psychologist or social worker.</td>
</tr>
<tr>
<td><strong>cancer care team</strong></td>
<td>The team at your hospital or treatment centre will often include social workers, psychologists, psychiatrists and spiritual care practitioners. If you let your cancer specialist, cancer care coordinator or cancer nurse know how you are feeling, they can arrange for you to see these other health professionals as needed.</td>
</tr>
<tr>
<td><strong>psycho-oncologist</strong></td>
<td>A psycho-oncologist is a social worker, psychologist or psychiatrist who has specialised in the field of cancer care (oncology). They provide support to people with cancer and their families, and often work in hospitals and cancer treatment centres.</td>
</tr>
<tr>
<td><strong>counsellor</strong></td>
<td>Counsellors can listen to what’s going on in your life and offer strategies for dealing with issues. They do not need to have any qualifications to practise, although many do, so it’s a good idea to check before making an appointment. Counselling may be available through your local Cancer Council – call 13 11 20 to find out.</td>
</tr>
<tr>
<td><strong>social worker</strong></td>
<td>Social workers provide emotional support, offer practical and financial assistance, and help people find support services. They must complete a four-year undergraduate or two-year postgraduate degree.</td>
</tr>
</tbody>
</table>
### Health professionals who can help

- **GP**: Your GP can assist you with treatment decisions and works in partnership with your specialists in providing ongoing care. They can refer you to other health professionals for support with managing emotions or thoughts. Check with your GP whether you can access Medicare rebates for sessions with a psychologist or social worker.

### Psychologists

Psychologists often develop expertise in particular approaches – those who specialise in counselling use their understanding of the mind to guide clients through issues with how they think, feel and learn. A registered psychologist must complete four years of psychology at undergraduate level, followed by either postgraduate studies in psychology or two years of supervised clinical practice.

### Mental Health Nurse

The role of a mental health nurse includes assessing people, giving medicines and assisting in behaviour modification programs. They must be a registered nurse who has completed further study in mental health nursing.

### Psychiatrists

A psychiatrist is a trained medical doctor who specialises in the diagnosis, treatment and prevention of mental illness. As well as providing psychological support and discussing issues with patients, a psychiatrist may prescribe medicines to help manage a range of emotional conditions. You need a referral from your GP to see a psychiatrist.

### Spiritual Care Practitioners

Also known as a pastoral carer, a spiritual care practitioner is often a member of the team at hospitals and cancer treatment centres. They can discuss emotional and spiritual matters and help you reflect on your life and search for meaning. They can also arrange prayer services and other religious rituals, if appropriate.

### Cancer Council

If you just want to talk through your concerns or you’re not sure where to go for help, you can talk to a health professional at Cancer Council by calling **13 11 20** (see inside back cover for more information).
Practical and financial help

A cancer diagnosis can affect every aspect of your life and often creates practical and financial issues.

There are many sources of support and information to help you, your family and carers navigate all stages of the cancer experience, including:

- information about cancer and its treatment
- access to benefits and programs to ease the financial impact of cancer treatment, such as help with the cost of prescription medicines, transport costs, utility bills or basic legal advice
- home care services, such as Meals on Wheels, visiting nurses and home help
- aids and appliances to make life easier at home
- support groups and programs
- counselling services.

The availability of services may vary depending on where you live, and some services will be free but others might have a cost.

To find good sources of support and information, you can talk to the social worker or nurse at your hospital or treatment centre, or get in touch with Cancer Council 13 11 20.

See our Cancer and Your Finances and Cancer, Work & You booklets.

My family members don’t really understand what it’s like to have cancer thrown at you, but in my support group, I don’t feel like I have to explain. Sam
Support from Cancer Council

Cancer Council offers a range of services to support people affected by cancer, their families and friends. Services may vary depending on where you live.

**Cancer Council 13 11 20**
Trained professionals will answer any questions you have about your situation and link you to services in your area (see inside back cover).

**Information resources**
Cancer Council produces booklets and fact sheets on over 25 types of cancer, as well as treatments, emotional and practical issues, and recovery. Call 13 11 20 or visit your local Cancer Council website (see back cover).

**Practical help**
Your local Cancer Council can help you find services or offer guidance to manage the practical impact of a cancer diagnosis. This may include access to transport and accommodation services.

**Legal and financial support**
If you need advice on legal or financial issues, we can refer you to qualified professionals. These services are free for people who can’t afford to pay. Financial assistance may also be available. Call Cancer Council 13 11 20 to ask if you are eligible.

**Peer support services**
You might find it helpful to share your thoughts and experiences with other people affected by cancer. Cancer Council can link you with individuals or support groups by phone, in person, or online. Call 13 11 20 or visit cancercouncil.com.au/OC.
Useful contacts
You can find many useful resources online, but not all websites are reliable. These websites are good sources of support and information.

### Online and telephone support

<table>
<thead>
<tr>
<th>Service</th>
<th>Website/Contact</th>
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<tbody>
<tr>
<td>Cancer Council</td>
<td>See back cover for websites 13 11 20</td>
</tr>
<tr>
<td>Cancer Council Online Community</td>
<td>cancercouncil.com.au/OC</td>
</tr>
<tr>
<td>beyondblue</td>
<td>beyondblue.org.au</td>
</tr>
<tr>
<td>CanTeen (for young people aged 12–25 affected by cancer)</td>
<td>canteen.org.au 1800 835 932</td>
</tr>
<tr>
<td>Carers Australia</td>
<td>carersaustralia.com.au</td>
</tr>
<tr>
<td>Kids Helpline</td>
<td>kidshelpline.com.au</td>
</tr>
<tr>
<td>Lifeline</td>
<td>lifeline.org.au</td>
</tr>
<tr>
<td>MensLine Australia</td>
<td>mensline.org.au</td>
</tr>
<tr>
<td>QLife (for LGBTI – lesbian, gay, bisexual, transgender, intersex)</td>
<td>qlife.org.au 1800 184 527</td>
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### Other Australian websites

<table>
<thead>
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<th>Service</th>
<th>Website/Contact</th>
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<tbody>
<tr>
<td>The Thing About Cancer podcast</td>
<td>cancercouncil.com.au/podcasts</td>
</tr>
<tr>
<td>Australian Cancer Trials</td>
<td>australiancancertrials.gov.au</td>
</tr>
<tr>
<td>Australian Psychological Society (Find a Psychologist)</td>
<td>psychology.org.au/find-a-psychologist</td>
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<tr>
<td>Breast Cancer Network Australia</td>
<td>bcna.org.au</td>
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### Other Australian websites (continued)

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<thead>
<tr>
<th>Website</th>
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<tbody>
<tr>
<td>Cancer Australia</td>
<td>canceraustralia.gov.au</td>
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<tr>
<td>CanDo app</td>
<td>candoapp.com.au</td>
</tr>
<tr>
<td>Carer Gateway</td>
<td>carergateway.gov.au</td>
</tr>
<tr>
<td>Department of Health</td>
<td>health.gov.au</td>
</tr>
<tr>
<td>Department of Human Services (includes Medicare and Centrelink)</td>
<td>humanservices.gov.au</td>
</tr>
<tr>
<td>eviQ (Patients and carers)</td>
<td>eviq.org.au/patients-and-carers</td>
</tr>
<tr>
<td>Healthdirect Australia</td>
<td>healthdirect.gov.au</td>
</tr>
<tr>
<td>Look Good Feel Better</td>
<td>lgfb.org.au</td>
</tr>
<tr>
<td>LOVLIST</td>
<td>lovlist.org</td>
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<tr>
<td>Mindspot</td>
<td>mindspot.org.au</td>
</tr>
<tr>
<td>Moodgym</td>
<td>moodgym.com.au</td>
</tr>
<tr>
<td>My Health Record</td>
<td>myhealthrecord.gov.au</td>
</tr>
<tr>
<td>Optimal Care Pathways</td>
<td>cancerpathways.org.au</td>
</tr>
<tr>
<td>Prostate Cancer Foundation of Australia</td>
<td>prostate.org.au</td>
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<tr>
<td>Relationships Australia</td>
<td>relationships.org.au</td>
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### International websites

<table>
<thead>
<tr>
<th>Website</th>
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<tbody>
<tr>
<td>American Cancer Society</td>
<td>cancer.org</td>
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<tr>
<td>Cancer Research UK</td>
<td>cancerresearchuk.org</td>
</tr>
<tr>
<td>Caringbridge</td>
<td>caringbridge.org</td>
</tr>
<tr>
<td>Macmillan Cancer Support (UK)</td>
<td>macmillan.org.uk</td>
</tr>
<tr>
<td>Ottawa Hospital Research Institute Patient Decision Aids (Canada)</td>
<td>decisionaid.ohri.ca</td>
</tr>
</tbody>
</table>
Question checklist

Asking your doctor questions will help you make an informed choice. You may want to include some of the questions below in your own list.

**Emotional and practical issues**
- Where can I get help for how I am feeling?
- How can I find a professional counsellor or psychologist?
- How can I see a social worker at my treatment hospital?
- Which complementary therapies might help me?
- Who can I talk to about financial plans and legal matters?
- Where can my family get reliable information, help and advice?

**Diagnosis and treatment**
- What type of cancer do I have? Has it spread?
- Are the latest tests and treatments for this cancer available in this hospital?
- Will a multidisciplinary team be involved in my care?
- What treatment do you recommend? What is the aim of the treatment?
- If I don’t have the treatment, what should I expect?
- How long do I have to make a decision?
- I’m thinking of getting a second opinion. Who could you recommend?
- What will the treatment cost? Can the cost be reduced if I can’t afford it?
- Are there any clinical trials or research studies I could join?

**Side effects**
- What are the risks and possible side effects of each treatment?
- Will I have a lot of pain? What will be done about this?
- Can I work, drive and do my normal activities while having treatment?
- Will the treatment affect my sex life and fertility?
- Should I change my diet or physical activity during or after treatment?

**After treatment**
- How often will I need check-ups after treatment? Will they involve blood tests or scans?
- If the cancer returns, how will I know? What treatments could I have?
You may be reading this booklet because you are caring for someone with cancer. What this means for you will vary depending on the situation. Being a carer can bring a sense of satisfaction, but it can also be challenging and stressful.

It is important to look after your own physical and emotional wellbeing. Give yourself some time out and share your concerns with somebody neutral such as a counsellor or your doctor, or try calling Cancer Council 13 11 20. There is a wide range of support available to help you with both the practical and emotional aspects of your caring role.

**Support services** – Support services such as Meals on Wheels, home help or visiting nurses can help you in your caring role. You can find local services, as well as information and resources, through the Carer Gateway. Call 1800 422 737 or visit carergateway.gov.au.

**Support groups and programs** – Many cancer support groups and cancer education programs are open to carers as well as to people with cancer. Support groups and programs offer the chance to share experiences and ways of coping.

**Carers Associations** – Carers Australia works with the Carers Associations in each state and territory to provide information and services to carers. Call 1800 242 636 or visit carersaustralia.com.au.

**Cancer Council** – You can call Cancer Council 13 11 20 or visit your local Cancer Council website to find out more about carers’ services. 

→ See our *Caring for Someone with Cancer* booklet.
Ways carers can help

There are many ways to show your concern or offer support to someone who has been diagnosed with cancer.

**Become informed**
Learn about the cancer and its treatment. This will help you understand what the person is facing, but be careful about offering advice.

**Offer to go with them to appointments**
You can join in the discussion, take notes or simply listen.

**Don’t be afraid to say nothing**
The silence might feel awkward, but simply being close to the person or holding their hand also shows you care and provides comfort.

**Provide practical help**
Take the kids to school, cook a meal, help with the house or garden, or offer to drive them to appointments. You don’t have to do it all yourself – accept offers of help from family and friends.

**Try not to do too much or take over**
Give the person the opportunity to do things for themselves to maintain a sense of normality and independence. They may appreciate the chance to be useful and connected to activities they enjoy, such as reading to the kids, even if they can’t do as much physically.
Focus on other things
Make time to watch your favourite sport or TV show together, play a card or board game, or go on an outing together.

Listen to their concerns
Try to understand their feelings and perspective about treatment, side effects, finances and the future.

Be around
Your presence will help them feel less isolated and let them know you care. If you are not there in person, check in by phone, text or email.

Talk honestly about your feelings
Try not to change the subject if it gets uncomfortable. Instead, share how you feel and respect each other’s feelings.

Look after yourself
Give yourself time to rest, as well as time away from the person with cancer. They probably would also appreciate some time alone. You need to look after your health if you’re going to give support. Don’t underestimate the emotional impact of supporting someone through cancer.
advanced cancer
Cancer that is unlikely to be cured. It may be limited to its original site (primary cancer) or may have spread to other parts of the body (secondary or metastatic cancer).

alternative therapies
Therapies that are used in place of conventional treatment, often in the hope that they will provide a cure.

anxiety
Strong feelings of fear, dread, worry or uneasiness. Physical symptoms can include racing heart, shallow/fast breathing, shaking, nausea and agitation.

benign
Not cancerous or malignant.

cancer
Uncontrolled growth of cells that may result in abnormal blood cells or grow into a lump called a tumour. These cells may spread throughout the lymphatic system or bloodstream to form secondary or metastatic tumours.

check-up
A medical appointment involving tests and scans after treatment has finished. Also known as a follow-up.

chemotherapy
The use of drugs to treat cancer by killing cancer cells or slowing their growth. May be given alone or in combination with other treatments.

complementary therapies
Treatments used in conjunction with conventional treatment, which improve general health, wellbeing and quality of life, and help people cope with side effects of conventional cancer treatment.

depression
Very low mood and loss of interest or enjoyment in life, lasting for more than two weeks. It can cause physical and emotional changes.

diagnosis
The identification and naming of a person’s disease.

distress
Emotional, mental, social or spiritual suffering. Distress may range from feelings of vulnerability and sadness to stronger feelings of depression, anxiety, panic and isolation.

fatigue
Extreme tiredness and lack of energy that doesn’t go away with rest.

general practitioner (GP)
A doctor based in the community who treats all illnesses, referring patients to specialists as needed. Sometimes known as a family doctor.

infertility
The inability to conceive a child.

insomnia
Difficulties in getting to sleep or staying asleep, or early morning waking with an inability to return to sleep.

malignant
Cancerous. Malignant cells can spread (metastasise) and eventually cause death if they cannot be treated.
metastasis
A cancer that has spread from a primary cancer in another part of the body. Also known as secondary cancer.

primary cancer
The original cancer. Cells from the primary cancer may break away and be carried to other parts of the body, where secondary cancers may form.

prognosis
The predicted outcome of a person’s disease.

radiation therapy
The use of targeted radiation to kill or damage cancer cells so they cannot grow, multiply or spread. The radiation is usually in the form of x-ray beams. Also called radiotherapy.

side effect
Unintended effect of a drug or treatment.

symptoms
Changes in the body that a patient feels or sees, which are caused by illness or treatment, e.g. pain, tiredness, rash or a stomach-ache.

tumour
A new or abnormal growth of tissue on or in the body. A tumour may be benign (not cancer) or malignant (cancer).

References
How you can help

At Cancer Council, we’re dedicated to improving cancer control. As well as funding millions of dollars in cancer research every year, we advocate for the highest quality care for cancer patients and their families. We create cancer-smart communities by educating people about cancer, its prevention and early detection. We offer a range of practical and support services for people and families affected by cancer. All these programs would not be possible without community support, great and small.

Join a Cancer Council event: Join one of our community fundraising events such as Daffodil Day, Australia’s Biggest Morning Tea, Relay For Life, Girls’ Night In and other Pink events, or hold your own fundraiser or become a volunteer.

Make a donation: Any gift, large or small, makes a meaningful contribution to our work in supporting people with cancer and their families now and in the future.

Buy Cancer Council sun protection products: Every purchase helps you prevent cancer and contribute financially to our goals.

Help us speak out for a cancer-smart community: We are a leading advocate for cancer prevention and improved patient services. You can help us speak out on important cancer issues and help us improve cancer awareness by living and promoting a cancer-smart lifestyle.

Join a research study: Cancer Council funds and carries out research investigating the causes, management, outcomes and impacts of different cancers. You may be able to join a study.

To find out more about how you, your family and friends can help, please call your local Cancer Council.
Being diagnosed with cancer can be overwhelming. At Cancer Council, we understand it isn’t just about the treatment or prognosis. Having cancer affects the way you live, work and think. It can also affect our most important relationships.

When disruption and change happen in our lives, talking to someone who understands can make a big difference. Cancer Council has been providing information and support to people affected by cancer for over 50 years.

Calling 13 11 20 gives you access to trustworthy information that is relevant to you. Our cancer nurses are available to answer your questions and link you to services in your area, such as transport, accommodation and home help. We can also help with other matters, such as legal and financial advice.

If you are finding it hard to navigate through the health care system, or just need someone to listen to your immediate concerns, call 13 11 20 and find out how we can support you, your family and friends.

Cancer Council services and programs vary in each area. 13 11 20 is charged at a local call rate throughout Australia (except from mobiles).

If you need information in a language other than English, an interpreting service is available. Call 13 14 50.

If you are deaf, or have a hearing or speech impairment, you can contact us through the National Relay Service. www.relayservice.gov.au