

Life with cancer

Tools and techniques to help
you along your cancer journey

Important Information

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Introduction

A cancer diagnosis can be an incredible shock and can stir up many emotions. You may be faced with some big decisions, changes to your body function and changes to your lifestyle.

In this booklet you will find some information to help you better understand cancer and give you some tools and techniques to improve your health and wellbeing during your recovery.

Looking after your physical, mental and emotional health is an important part of managing your condition.

While this information may help you, it is not a substitute for medical advice and it is important for you to maintain an ongoing relationship with your doctor, any medical specialists you may have, and any other health professionals that are within your medical team.

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Understanding cancer

Your body is made up of cells which are the basic building blocks of life and form the foundation of your various tissues and organs. Cancer is a disease of the body’s cells.

Normally cells grow and multiply in a controlled way, however in some cases an abnormal cell can be formed by mistake, and these cells can start to multiply. Cancer is the term used to describe this multiplication of abnormal cells and its potential to invade and damage surrounding tissue and spread throughout the body.

Most cancers start in a particular organ; this is called the primary site or primary tumour. Tumours can be benign (not cancer) or malignant (cancer).

There are many different types of cancers and they are named depending on the location of the primary site. For example, the primary site for bowel cancer is the bowel.

These different types of cancers are grouped into the following categories¹:

- **Carcinoma:** cancer that begins in the skin or in tissues that line or cover internal organs – for example, melanoma
- **Sarcoma:** cancer that begins in bone, fat, muscle, blood vessel, or other supportive or connective tissue – for example, osteosarcoma
- **Leukaemia:** cancer that begins in the tissues that make blood cells, such as the bone marrow – for example, acute myeloid leukaemia
- **Lymphoma and myeloma:** cancers that start in cells of the immune system – for example, Hodgkin’s lymphoma and multiple myeloma
- **Central nervous system cancer:** cancer that begins in the brain or spinal cord – for example, glioma.



MEDICAL TERMS YOU MIGHT HEAR

Cancer in situ: refers to abnormal cancer cells growing in one, localised area.

Benign Cancer: a cancer whereby cancer cells do not spread into surrounding areas. Benign cancers are not dangerous.

Malignant Cancer: a cancer whereby cancer cells spread into surrounding areas, or to different parts of the body. Malignant cancers are dangerous and treatment should be undertaken.

What are the risk factors for cancer?

For most cancers, the risks and causes are not fully understood. Cancer can sometimes develop without any specific causes.

There are some agents that may trigger a mistake in the cell replication process. These agents called ‘carcinogens’ may come from a chemical source (e.g. tobacco smoke, asbestos), a physical source (e.g. ultraviolet light, x-rays) or a biological source (e.g. certain viruses or bacteria).

There are a range of risk factors that can contribute to cancer. There are some factors which you cannot change, but many that you can.

Risk factors you cannot change

Age

As you get older, your risk of getting certain types of cancers increases.

Gender

Certain types of cancers are gender-specific (e.g. prostate cancer and cervical cancer).

Family history

In certain cases, cancer can be caused by an inherited faulty gene.

Other risk factors

While exposure to certain known carcinogens can be avoided (e.g. tobacco smoke or ultra-violet rays from sun exposure), some exposure may be difficult to avoid because of where you live, how close you are to various pollutants and your use of various products.

IS IT IN YOUR GENES?

Sometimes cancers can appear to “run in families.” In a lot of cases, this is mostly by chance, due to exposure to similar environmental or lifestyle risk factors, such as sun exposure, smoking or a particular diet. In fact, only about 5% of cancers³ are due to an inherited faulty gene that is passed on from a mother or father.

Certain patterns, such as the number of blood relatives developing cancer, similar ages at which the cancer develops, and similar types of cancers may indicate that you have an inherited faulty gene within your family.

It is important to note that this is not always the case. In addition, some people who inherit a faulty gene may not go on to develop cancer.

Discuss your specific questions and concerns with your doctor. They may recommend that you seek genetic counselling services to provide information about your and your family’s risk of developing cancer.

Understanding cancer

A BIT MORE ON CARCINOGENIC RISKS

You may see reports in the media about particular cancer risk associated with the exposure to certain chemicals, physical or biological agents.

To help avoid confusion or alarm, a method of classifying the level of risk of carcinogens was developed⁴. This classification system groups risk into five categories:

Proven Risks

Proven risks of cancer relate to situations in which an increased incidence of cancer is associated with exposure to the carcinogen. Some examples include:

- Smoking tobacco and/or passive smoking
- Drinking alcohol
- Excessive exposure (particularly occupational exposure) to some chemicals (e.g. asbestos, formaldehyde, soot and tar)
- Deliberate exposure to sunlight
- Chemicals in processed meats.

Likely Risk

Likely risks of cancer involve exposure to a recognised or probable carcinogen. Some examples include:

- Smoking marijuana
- Chemicals in processed meats
- Prenatal exposure to tobacco smoke (i.e. children whose mothers smoke during their pregnancy).

Inferred Risk

Inferred risks of cancer involve exposure to a possible carcinogen, although they are mainly substances found to be carcinogenic in experimental animals. Some examples include:

- Pollutants and pesticide residues in breast milk
- Personal use of hair dyes
- Living near power lines.

Unknown Risk

Unknown risks of cancer involve exposure to a probable or possible carcinogen. There needs to be greater specification around the method and length of exposure. Some examples include:

- Consuming chlorinated water
- Mobile phone use
- Sodium lauryl sulphate in cosmetics.

Unlikely Risk

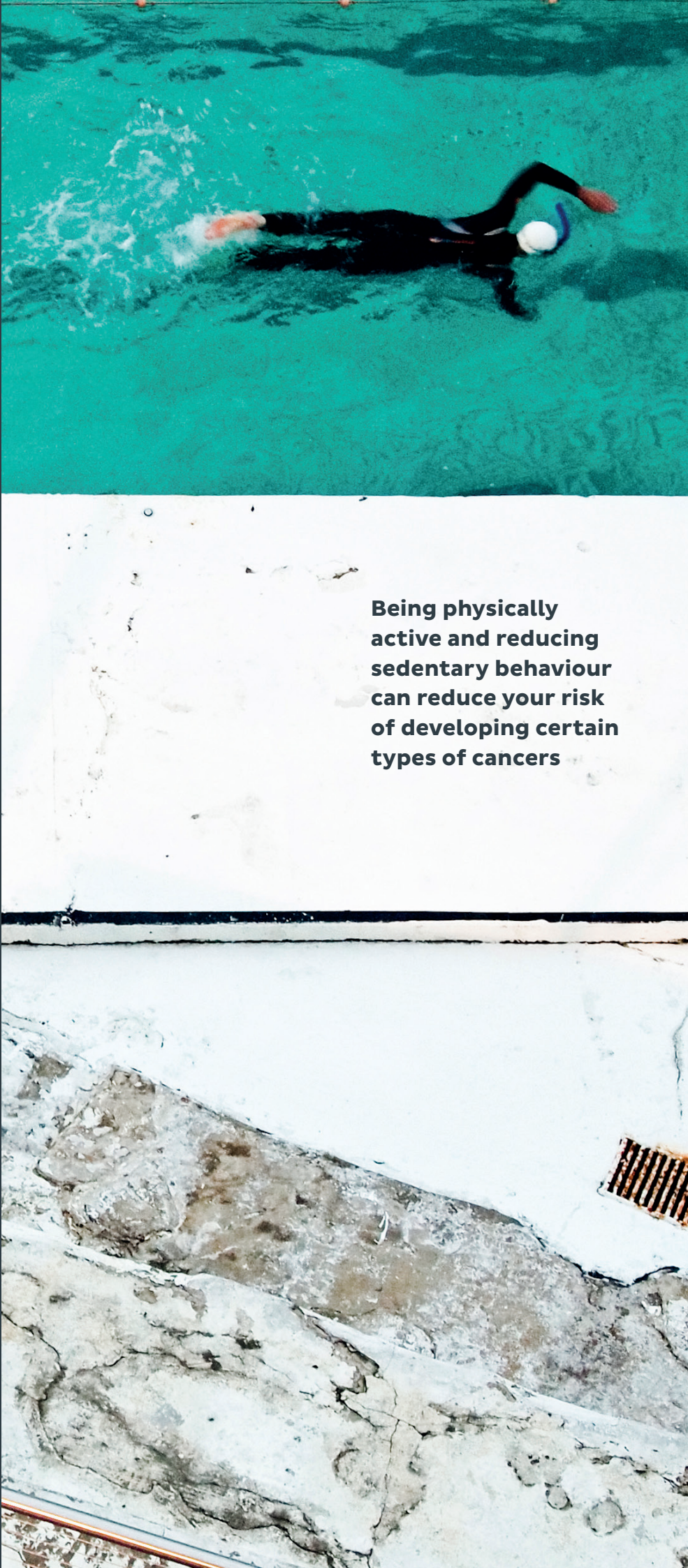
Unlikely risks of cancer involve exposure to possible carcinogens or agents where there is insufficient evidence of their carcinogenic effect. Some examples include:

- Consuming artificial sweeteners (apart from aspartame)
- Coffee drinking
- Using deodorants
- Drinking fluoridated water.



MEDICAL TERMS YOU MIGHT HEAR

Carcinogen: any substance; either chemical, physical or biological; which tends to produce cancer in the body.



Risk factors you can change

Smoking

Smoking tobacco is the greatest preventable cause of cancer. Smoking increases your risk of developing cancers of the head and neck, lungs, throat, bowel, stomach, pancreas, liver and kidney⁵.

Alcohol

Drinking too much alcohol increases the risk of developing cancer in the head and neck, throat, liver, bowel and breast⁴.

Overweight or obesity

Carrying too much body weight can increase your risk of developing certain types of cancer, including cancers of the bowel, oesophagus, endometrium, pancreas, kidney and breast⁴.

Physical inactivity

Regular physical activity is important for improving cardiovascular fitness, reducing body weight, maintaining strong healthy bones and reducing stress. Being physically active and reducing sedentary behaviour can reduce your risk of developing certain types of cancers including colon cancer, post-menopausal breast cancer and endometrial cancers⁵.

Unhealthy eating habits

A poor diet increases your cancer risk, particularly in cancers associated with your digestive tract. Evidence shows diets high in red meat and processed meats such as ham, salami and other deli meat can increase your risk of developing colorectal cancer, as well as some other cancers⁶. There is also evidence that salt is a probable cause of stomach cancer⁷.



The information contained in this section is general information only and should not be used as a substitute for medical advice. Please see your doctor if you have concerns or specific questions relating to your health.

ASSESSING A HEALTHY WEIGHT

These goals are a general guide. Work with your doctor to set your personal healthy weight goal.

BODY MASS INDEX (BMI)

How to measure BMI

Weight (kg) ÷ Height (m²) = BMI

For example, a 75kg person with a height of 1.75m:

75 ÷ 3.06 (1.75 x 1.75) = 24.5 BMI

Risk Classification

BMI	Classification	Risk
Less than 18.50	Underweight	Low*
18.50 – 24.99	Normal range	Average
25.00 – 29.99	Overweight/Preobese	Increased
30.00 – 34.99	Obese Class 1	Moderate
35.00 – 39.99	Obese Class 2	Severe
40.0 or greater	Obese Class 3	Very severe

* Risk of other clinical problems increased

WAIST MEASUREMENT

How to measure your waist

STEP 1

Using a tape measure, wrap around your waist at the halfway point between the top of your hips and your lowest ribs

STEP 2

Breathe out normally and make sure the tape is directly against skin, without pulling in too tight

Risk Classification

Waist	Risk
Less than 80cm	Average
80 – 88cm	Increased
Greater than 88cm	Greatly increased
Less than 94cm	Average
94 – 102cm	Increased
Greater than 102cm	Greatly increased

Screenings and checks

There are regular screening services available in Australia to detect the early stages of certain cancers. Regular self-checks are also recommended. These include:

Breast cancer screening

A mammogram can detect the early stages of breast cancer in women without symptoms.



A screening mammogram is recommended for all women aged 50 to 74, every two years. It is available as part of the Breast Screen Australia program. Mammograms are also free of charge for women aged between 40–49 and those aged over 74, however they do not receive invitation letters.

It is important that all women perform regular self-checks to be familiar with their breasts and detect any changes or unusual lumps.

Cervical cancer screening

A Pap smear can detect the early changes in the cells of a woman's cervix, before cancer develops.



A Pap smear is recommended every two years from the age of 18 years (or two years after first sexual intercourse, whichever is later) until the age of 69.

Bowel cancer screening

A faecal occult blood test (FOBT) can detect early stages of bowel cancer in men and women.



A bowel cancer screening is recommended every two years once you are over 50 years of age. There is a free National Bowel Cancer Screening program that sends a kit by post to people aged 50, 54, 55, 58, 60, 64, 68, 70, 72 and 74 to do the test at home. From 2020, all Australians aged 50–74 will be offered the test every two years.

Testicular cancer self-check

While testicular cancer is not common, it is the second most common cancer in younger men between the ages of 18 and 39 years⁸. Men who have had an undescended testicle or have a family history of testicular cancer are at an increased risk.



It is important that all men perform regular self-checks to be familiar with their testicles and be aware of any changes or unusual lumps. If you see or feel any changes, visit your doctor to discuss.

Skin cancer self-check

Melanoma (the most dangerous form of skin cancer) is the fourth most common cancer in Australians². It is important that you perform regular self-checks to be familiar with your skin and notice any new spots or changes in existing freckles and moles.



Avoid excessive sun exposure and solaria, and wear sunscreen and protective clothing to lower your risk of skin cancer⁴.



MEDICAL TERMS YOU MIGHT HEAR

Mammogram: a breast x-ray that can detect small tissue changes in the breast that are too difficult or too small to detect with a physical examination.

Pap smear: a sample of cells taken from the cervix (located at the lower part of the uterus in the female reproductive system) and smeared onto a glass slide. The sample is then sent to a lab to check for any cell changes.

There is a vaccine for cervical cancer that prevents the types of human papillomavirus (HPV) that cause most cervical cancers. Currently the vaccine does not protect from all types of HPV so it is important to still get regular Pap smears, regardless of whether you are vaccinated or not.

Faecal Occult Blood Test (FOBT): a faecal occult blood test is a test that is able to detect tiny traces of blood in the faeces (bowel motions) which can indicate early signs of bowel cancer. The test can be done in the comfort of your home. A small sample from two separate bowel motions is taken using the test kit. The samples are then sent away to a lab for testing.

What are the symptoms of cancer?

Australians have a 1 in 2 risk of being diagnosed with cancer before the age of 85². Finding cancer early can help improve your chances of successful treatment and long term survival.

Some symptoms to keep an eye out for are:



Changes in skin

- Lumps, sores or ulcers that do not heal
- A new mole or a change in an existing mole, including changes in shape, size, colour or bleeding occurrence.



Changes in eating and/digestion

- Problems with eating including a change in appetite, discomfort in swallowing or after eating
- Persistent abdominal pain or bloating
- Changes in bowel habits, including blood in a bowel motion.



Other changes

- Unexplained weight loss or gain
- Hoarseness or cough that does not go away or shows blood
- Unexplained night sweats
- Blood in urine
- Feeling weak or tired.



Specifically for men

- Changes in your testicles such as change in shape, lumpiness or consistency
- Problems or pain going to the toilet or urinating or changes that persist.



Specifically for women

- Change in your breast such as changes in size, shape, colour, lumpiness, texture; having unusual pain or discharge; or nipples that suddenly turn inwards
- Unexplained vaginal bleeding between periods.



In most cases, these symptoms are not due to cancer and may relate to other issues. However, if you notice any of the above symptoms, visit your doctor to discuss further.

If you have a symptom or screening test that suggests an abnormality, your doctor and health care team will do some tests to confirm the diagnosis and determine which treatment is best for you. They may include:

Lab tests

In some cases, high or low levels of certain substances in the blood, urine and other body fluids may indicate that cancer is present. Measuring these substances can help with a diagnosis, although cannot be the only information that doctors use when identifying cancer.

Biopsy

In many cases, a biopsy is needed to make a diagnosis of cancer. A biopsy is where a sample is taken from the suspected cancer site. The biopsy is then investigated under a microscope. Biopsies are taken in various methods such as with a needle, via a thin tube called an endoscope (which is inserted through a natural body opening such as the mouth), or through surgery.

Imaging

Various forms of imaging can allow your doctor to see if there is a tumour present. Imaging procedures can include:

Computerised tomography (CT) scan

A CT scan uses a series of x-rays taken from different angles to digitally form a cross-sectional image of a particular area, allowing a doctor to investigate an area of the body without cutting it.

Magnetic resonance imaging (MRI)

An MRI uses a strong magnet linked to a computer to take pictures of soft tissue (such as tumours) in the body.

Nuclear scan

A nuclear scan uses a tracer (a small amount of radioactive material that is injected, ingested or inhaled into the body) that collects in certain bones and organs. A machine detects this radioactive material and converts it into an image.

Positron emission tomography (PET) scan

Like a nuclear scan, a PET scan uses a tracer which collects in the body. A computer creates 3D images of the areas where the tracer collects, showing how certain organs and tissues are functioning.

Ultrasound

Ultrasounds use high frequency sound waves (that people cannot hear) to bounce off body tissue. The returning sound waves are then converted into an image. An ultrasound is only performed on an area of interest, rather than the entire body.

X-rays

X-rays use low dose of radiation to create a 2D image of a particular part of the body.

Treating your cancer

When you have cancer, you will receive recommendations of treatments, medications and/or advice to improve your future outcomes.

The type of treatment recommended by your doctor will depend on the type of cancer you have, how advanced it is, and other personal factors. It is important to discuss your options, the benefits and side effects of the treatment with your doctor to decide the best option for you.

While not a complete list, here are some of the most common cancer treatments.

Procedures and surgery

Surgery is a common treatment for many cancers, particularly when the cancer has not spread. While surgery is most commonly performed to remove a tumour, surgery might be recommended for a range of reasons including:

- **Diagnosis and staging:** to help diagnose the type of tumour, how big it is and how much it has spread or changed
- **First-line or primary treatment:** the first treatment given to the disease to remove the tumour/s as much as possible
- **Combination treatment:** before or after another treatment such as chemotherapy or radiation therapy
- **Palliative surgery:** to relieve symptoms caused by the tumour such as pain or effect on the function of an organ.

Depending on the type of surgery (i.e. major, with general anaesthetic or minor, without general anaesthetic), there might be varying levels of pain, discomfort, bruising, swelling or scarring that may occur.

Doctors and medical staff will attempt to reduce the risk of any side effects and help to reduce any pain that is experienced. Remember to speak to your medical team about any of your concerns.



MEDICAL TERMS YOU MIGHT HEAR

Cancer staging: cancer staging is the process to determine the details of how large a cancer is and if or how far it has spread within the body. This classification helps your doctor to suggest the best treatment pathway for you.

Medications and therapies

Medications and various therapies are commonly used in cancer treatment. In some cases, they are used alone, in other cases they are delivered in combination with other therapies or with surgery.

Chemotherapy

Chemotherapy is the use of particular drugs to destroy cancer cells. There are many different types of chemotherapy drugs. In some cases, one single drug is used, however sometimes multiple drugs are given in combination. Chemotherapy is often given in multiple courses or cycles with periods of rest in between which allow normal cells to recover.

Chemotherapy can be given in various ways. This can include:

- In the form of pills that you swallow
- In the form of a cream that you apply to the skin
- By injecting it directly into your bloodstream
- By injecting it into a large muscle
- By injecting it into your abdomen
- By injecting it just under the skin.

Radiation therapy

Radiation therapy (also known as radiotherapy) uses radiation, aimed directly at a tumour to destroy cancer cells. By targeting the radiation directly at cancer cells, this helps to limit the reach of the radiation to healthy cells. Despite the ability for radiotherapy to damage healthy cells that surround a tumour, cancer cells tend to be particularly receptive to it's effect.

Radiation therapy can be used:

- To shrink your tumour prior to surgery and make it easier to remove
- After your surgery to destroy any remaining cancer cells
- As your main treatment, if surgery is not a good option
- In combination with another treatment such as surgery, chemotherapy or stem cell transplant
- To relieve symptoms of your tumour.

Immunotherapy

Immunotherapy (also known as biologic therapy) uses certain parts of your immune system to fight cancer. This type of therapy is thought to slow down the growth and spread of cancer and help your immune system destroy existing cancer cells. Immunotherapy is often given in multiple courses or cycles with periods of rest in between which allow normal cells to recover.

Immunotherapy can be given in different ways. This can include:

- In the form of pills or liquid that you swallow
- In the form of a cream that you apply to the skin
- By injecting it directly into your bloodstream
- By injecting it into the bladder.

Targeted therapy

Targeted therapy uses substances to specifically attack cancer cells, without damaging healthy cells. This is done by targeting the elements (such as genes or proteins) that differ between the two cells and stopping the process that makes cancer cells grow or limiting the blood supply which causes their growth to slow.

Targeted therapy can be given in different ways. This can include:

- In the form of pills or liquid that you swallow
- By injecting it directly into your bloodstream through a needle that is inserted into one of your veins.

Hormone therapy

Some cancers including breast, prostate and thyroid cancers use hormones to grow. Hormone therapy (also known as endocrine therapy) looks to stop the production of such hormones or change how these certain hormones behave.

Hormone therapy can be given in different ways. This can include:

- In the form of pills or liquid that you swallow
- By injecting it into a large muscle
- By injecting or implanting just under the skin
- By surgically removing hormone-producing organs or glands.

Stem cell transplant

A stem cell transplant (also known as a bone marrow transplant) is a treatment sometimes recommended if you have blood cancer such as leukaemia or lymphoma. The procedure is often performed in combination with chemotherapy or radiation therapy whereby cancer cells are destroyed and replaced with healthy stem cells (either from yourself or a donor).

Complementary therapies

Complementary therapies (sometimes called ‘integrative medicine’) include treatments or activities that may be used in conjunction with your conventional medical treatment to improve the side effects of cancer and recovery. Some of these benefits can include reducing stress, anxiety, depression, fatigue and pain, an improving quality of life.

Some complementary therapies include:

- Meditation
- Relaxation therapy
- Counselling, support
- Psychological therapy for pain management
- Massage
- Acupuncture
- Yoga.

It is important to choose complementary therapies that are scientifically proven to be safe and effective. Speak to your doctor or hospital health care team about which therapies are best for you.

A NOTE ON ALTERNATIVE THERAPIES

You may encounter alternative medicines and therapies (such as special diets) that are suggested as alternatives to the conventional medical treatment for cancer.

There is little evidence that support the effectiveness of alternative therapies – in many cases they have been tested and found to be harmful or ineffective⁹.

If you are considering an alternative therapy, speak with your doctor to make sure you are making an informed choice.

Recovering from cancer

Seeing your doctor

It is important for you to see your family doctor or specialist after you have finished your treatment. They will help you manage your health in the future including managing side effects, identifying any issues with your emotional health and monitor long-term treatments and detecting any signs that the cancer has returned.

How frequently you see your doctor will vary depending on your individual circumstances. Many people will have a follow-up every 3–6 months, in the early years following the cancer diagnosis and treatment and then less frequently after then.



If you notice any changes between your follow-up appointments, book in to see your doctor immediately and don't wait until your next follow-up.

Working with cancer

In many cases, cancer will affect your ability to work. The extent to how you will be affected can vary depending on what type of cancer you have, your cancer's progression, what treatment you are undergoing and any side effects from your treatment. It also depends on the type of work that you do and the physical and mental requirements of your role.

Many people who have cancer decide to continue working through their treatment. In a lot of cases, cancer treatment will have some sort of effect on your productivity at work. Telling your employer about your cancer diagnosis is a personal choice, but it may help open the discussion for reasonable adjustments to your working arrangements that you may need during treatment.

SIDE EFFECTS OF YOUR CANCER TREATMENT

Depending on the type of treatment you can have, you may have some side effects. This usually does not relate to the treatment working or not working. While not a complete list, some side effects that you may experience include:

- Nausea and vomiting
- Diarrhoea or constipation
- Loss of appetite
- Fatigue
- Dry throat, mouth sores or ulcers

- Dry, red and itchy skin
- Dry or tired eyes
- Increased risk of infection
- Increased risk of bruising
- Hair loss
- Muscle weakness
- Skin sensitivity to sunlight (specific drugs only).

If you are concerned about side effects, speak with your doctor about your symptoms.

WHY WORK?

There are some benefits to working during your treatment:

- Provide a routine and purpose
- Give you a chance to interact with people on a regular basis, especially with work friends and colleagues that provide you with social support
- Provide mental stimulation and feelings of accomplishment.

The decision to keep working is a personal one and you should always take the advice of your doctor. Whatever your decision, TAL is here to support you.

The Australian Government provides financial support to employers for employees through the Job Access program. Your employer will also find tools and resources, and information about developing strategies and creating a flexible work environment. You can find this by visiting jobaccess.gov.au.

Eating well with cancer

When you are undergoing cancer treatment or are on the path to recovery, you may need to nourish yourself a little differently.

While you are undergoing cancer treatment

During treatment you may require more kilojoules. At the same time, you might be experiencing some side effects from treatment that may affect how much you feel like eating and drinking. Some side effects include:

- Nausea and vomiting
- Diarrhoea or constipation
- Loss of appetite
- Fatigue
- Dry throat, mouth sores or ulcers
- Changes in taste and smell
- Difficulty swallowing.



Speak to your doctor or Accredited Practising Dietitian before changing your diet.

Here are some tips for eating while experiencing cancer treatment side effects:

- **Go with the flow:** if you lose your appetite, eat what you feel like, when you feel like it.
- **Go for small and frequent:** to reduce nausea, try to eat small meals and snacks, rather than three large meals.
- **Be prepared:** it can be good to have meals and snacks prepared in advance in the case you are too tired or feeling sick from treatment. Keeping snacks in easy reach can also prompt you to eat more. Pre-prepared meals from meal delivery services may also be an option.
- **Keep things plain and simple:** if you are feeling nauseous, choose bland foods such as crackers, toast, soft stewed fruits, baked potato, instant noodles and pretzels. Drinks such as ginger ale, lemonade or cordial may help with nausea and vomiting.
- **Drink up:** fluids containing kilojoules including smoothies, milkshakes, juices, milk-based coffees and soups can be a great way to get energy if you find it difficult to manage a meal.
- **Spice things up:** if food tastes bland or different, adding herbs, spices, sauces, salt and/or sugar may help to improve the flavour.
- **Smooth things out:** you may need to modify the texture of food if you have difficulty swallowing. Try soft, minced or pureed food to help with swallowing. Foods like porridge, yoghurt, smoothies, casseroles, bolognaise, stewed fruit and soups can help. Using sauces and gravies can also help moisten meals.
- **Swap it:** be prepared to try different foods, as your taste might change when you are undergoing treatment.

DO I NEED TO TAKE SUPPLEMENTS?

Depending on how advanced your cancer is, you may need extra kilojoules and extra protein. This can be difficult, especially if you have lost your appetite or have difficulty swallowing. You can boost your kilojoules and/or protein with food by choosing full fat dairy products instead of low fat options, using extra fats and oils, adding nut and seeds to food or adding egg to meals and recipes.

In some cases you may need to take supplements to meet your nutritional requirements. These can come in the form of powders that can be added to foods and drinks; in the form of liquid supplements that are ready-to-drink; and food-type supplements such as dessert powders, custards, puddings and soups.

If you are experiencing any difficulties in eating, or are losing weight, it is important to speak to your doctor or an Accredited Practising Dietitian to make sure you are getting the nutrients you require to improve your recovery.

FOOD SAFETY AND CANCER

You may have a weakened immune system as a result of undergoing cancer treatment. This can make you vulnerable to food-borne illness. Here are some tips to reduce your risk.

- 1 Keep it clean**
Wash your hands with warm water and soap before preparing and cooking food. Also keep your food preparation space and utensils clean, and use separate equipment when preparing raw meats.
- 2 Avoid the warm**
Food-borne bacteria tends to grow between the temperatures of 5 degrees Celsius and 60 degrees Celsius: this is often referred to as the 'temperature danger zone.' It is important to therefore keep hot food hot, and cold food cold. When thawing food, do it in the fridge or the microwave (rather than on the bench) and reheat leftovers to a high temperature.
- 3 Split it up**
Avoid cross-contamination by separating raw meat and poultry from other foods.
- 4 If it doubt, throw it out**
Make sure you eat food within its expiry date and within recommended consumption time when the food product is open. If you're unsure, or see signs that the food is spoiling, throw it out.
- 5 Be on the lookout when you eat out**
It may be good to avoid buffet style eating and deli foods such as cold meats and salads. These types of food may be sitting within the temperature danger zone and come in contact of many people. If you have no other choice, choose food items that are cooked and hot.



Exercising with cancer

Engaging in physical activity is an important part of your cancer recovery process.

After your treatment has finished

In a lot of cases, side effects of cancer treatment will cease and your appetite will return. It is therefore important to maintain a healthy balanced diet after treatment.

The Australian Dietary Guidelines¹⁰ suggest the following tips that can help to achieve a healthy weight and improve overall health.

Enjoy a wide variety of foods from these five groups every day

- Plenty of vegetables, including different types and colours, and legumes/beans
- Fruit
- Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced fat (reduced fat milks are not suitable for children under the age of two years).

And drink plenty of water.

Limit saturated fat

Limit foods high in saturated fat such as biscuits, cakes, pastries, pies, processed meats, burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.

- Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and mono-unsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Limit added salt

Limit intake of foods and drinks containing added salt.

- Read labels to choose lower sodium options among similar foods
- Do not add salt to foods in cooking or at the table.

Limit added sugars

Limit intake of foods and drinks containing added sugars, such as confectionery, sugar sweetened soft drinks and cordials, fruit drinks, vitamin waters, energy and sports drinks.

Limit alcohol intake

If you choose to drink alcohol, limit intake. For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is the safest option.

DO I NEED TO GO ON A SPECIAL DIET?

There are many diets in the media that promote cancer prevention or cancer cure. It is important to be wary of diets that restrict your energy intake or cut out whole food groups.

DIETS AVOIDING PROCESSED MEAT AND RED MEAT

The World Health Organisation has classified processed meat (such as bacon, salami, ham) as carcinogenic to humans. Red meat is also classified as a possible carcinogen to humans. The Australian Dietary Guidelines¹⁰ recommend to limit serves of lean meat to 65g-100g, with a maximum of 455g per week.

Exercise can help you to manage side effects from your treatment, help you get back to your usual activities quicker and in some cases, improve treatment outcomes. It can also improve your mental health and help to improve your energy levels.

Talk to your doctor or exercise professional (such as a physiotherapist or an exercise physiologist) about the right program for you.

Australia's Physical Activity and Sedentary Behaviour Guidelines¹¹ recommend adults be active on most, preferably all, days of the week. The guidelines recommend a weekly total of 2½ to 5 hours of moderate-intensity exercise, along with strength-training (resistance) activities twice a week. The guidelines also recommend to break up long periods of sitting as often as you can.

Because cancer and the effects of treatment can vary from day to day, you may need to be flexible with your exercise program. You may experience swelling in certain areas of the body, fatigue, pain, nausea, weakness, skin irritation and nerve damage that can affect how you move your body. On days that you are feeling quite sick or extremely tired, you may need to scale back your activity. On good days, you may be able to do a bit more activity.

Medicare or your private health fund may provide limited cover for visits to an exercise physiologist or a physiotherapist. Ask your doctor for a referral to an exercise professional.

Talk to your doctor before starting a new exercise program.

WHAT IS MODERATE INTENSITY EXERCISE?

Moderate intensity physical activity requires some effort, but still allows you to speak easily while undertaking the activity (you should be able to talk but not sing during the activity). Examples include brisk walking, riding a bike, recreational swimming, dancing, social sports, aqua aerobics and gardening.

WHAT ARE STRENGTH-TRAINING OR RESISTANCE EXERCISES?

Strength-training or resistance exercises use weight to cause muscles to contract. This type of exercise builds strength, endurance and tone in muscles.

Strength-training exercises can use body weight, elastic resistance bands or other external weights (such as dumbbells) for creating the resistance.

Examples include:

- Squats
- Bicep curls
- Shoulder press
- Lunges
- Push-ups.

Consult your doctor or exercise professional before starting a new exercise program.



If your immunity is severely compromised, avoid communal training venues such as swimming pools and gyms, where you have an increased risk of infection.

Managing your emotional health with cancer

Being told you have cancer can cause a major disruption to your life. You may be faced with some changes in your normal routine, need to make big decisions about your treatments, and you may be confronted with changes to your body.

Beyond the physical impacts of cancer and its treatment, you can also face some emotional challenges. Cancer will often highlight the fragility of life and can cause people to re-evaluate their priorities, routine and relationships around them.

As such, feelings of distress can emerge at any time after your diagnosis and can often vary throughout your cancer journey. It is common to experience a range of emotions including fear, anger, grief, loss, sadness and stress. However, you may also feel emotions like relief, gratitude and hope.

Feelings of distress often improve over time as you get used to your diagnosis and treatment and learn how to cope with any shock or stress.

It is important to take note of how you are feeling. While it is common to experience feelings of depression and anxiety, it is important to address these feelings if they last longer than two weeks. The good news is that with the right treatment, most people recover from anxiety and depression.

IN AUSTRALIA,
SURVIVAL RATES
FOR CANCER
HAVE INCREASED
SIGNIFICANTLY
OVER THE YEARS¹²

BREAKING THE NEWS

- One of the hardest things can be telling others about your diagnosis.
- It can also be draining to tell a lot of people over and over about your condition.
- It may be a good strategy for you to tell the people you trust, at a comfortable time, and ask them to relay the news to others.

What is depression?

Depression is more than just sadness or a low mood – it’s a serious condition that can have severe effects on both physical and mental health.

While some of the following symptoms may be as a result of your cancer and its treatment, they could also indicate depression. If you have experienced any of the following , talk to your doctor.

Have you:

- Felt isolated from social supports?
- Lost or gained a lot of weight or had less or more appetite?
- Had disturbed sleep?
- Lacked motivation to engage with others or tasks which you previous enjoyed?
- Felt irritable, frustrated and moody?
- Felt slowed down, restless or overly busy?
- Felt tired or had no energy?
- Felt worthless or felt excessively guilty?
- Had poor concentration, difficulties thinking or been very indecisive?
- Had recurrent thoughts of death or dying?

What is anxiety?

Anxiety is more than just feeling a bit stressed – it’s a serious condition that can make it difficult to cope with day to day life.

While some of the following symptoms may be as a result of your cancer, they could also indicate anxiety. If you have experienced any of the following symptoms, talk to your doctor.

Are you:

- Feeling very worried or anxious most of the time?
- Finding it difficult to calm down?
- Experiencing physical symptoms such as hot or cold flushes, tightening of the chest, difficulty breathing or a racing heart?
- Experiencing recurring thoughts that cause anxiety, but may seem silly to others?
- Feeling overwhelmed or frightened by sudden feelings of intense panic/anxiety?
- Avoiding situations or things which cause anxiety (e.g. social events or crowded places)?

SEEKING PROFESSIONAL HELP

Hiding your distress and putting on a brave face is not the answer to managing your emotional health. It may worsen your mental health. Depression and anxiety are like other health issues: there are treatments available.

Because depression and anxiety symptoms and experiences vary across people, there are a range of treatment options and health professionals who can help you on the road to recovery.

It is also common for your family, friends and carers, to experience depression as they process the impacts of your diagnosis. As such, it is equally important that they seek professional medical assistance if they are experiencing symptoms of depression and anxiety.

Treating depression and anxiety

There are several different treatments for depression or anxiety. Different treatments work for different people and you may need more or less intensive treatment depending on your symptoms. Treatment may include:

Lifestyle changes

Such as exercising, maintaining a healthy weight, reducing alcohol intake and increasing your social activity.

Psychological therapies

Such as ‘talk therapy’ approaches including Cognitive Behavioural Therapy (focusing on making changes to your unhelpful thinking patterns) or Acceptance Commitment Therapy (focusing on altering your perception of your thoughts and/or medication).

Your doctor may refer you to a mental health specialist like a psychiatrist, psychologist or social worker to help you with your recovery.

Psychiatrists are doctors who specialise in mental health. They can perform medical and psychological tests and prescribe medication. Some psychiatrists use psychological treatments like cognitive behavioural therapy (CBT) or integrated psychological therapy (IPT). Your doctor can refer you to a psychiatrist.

Psychologists, social workers and some occupational therapists specialise in providing non-medical psychological treatment for depression and other related disorders. You may be able to claim a rebate for this treatment through Medicare. To do this your doctor or psychiatrist will first have to refer you for this treatment.

Complementary therapies

Some complementary therapies such as yoga, meditation, art therapy, music therapy, massage and aromatherapy may help to improve your emotional health.

Speak to your doctor about the various complementary therapies that are suitable for you.

DO I NEED TO TAKE MEDICATION?

If you are experiencing severe or long-standing depression, your doctor may advise you to take medications along with psychological treatments.

Because research suggests that depression is often linked with an imbalance of chemicals in the brain, these medications referred to as ‘anti-depressants’ can help restore this balance.

It may take a few weeks for the medication to start working.

As with any treatment, always talk to your doctor before starting and stopping medications, and let them know about other medications or supplements that you are taking to make sure that they do not interfere with your treatment.

Where to find more information and support

Cancer Australia

Cancer Australia was established by the Australian Government in 2006 to benefit all Australians affected by cancer, their families and carers. Cancer Australia aims to reduce the impact of cancer, address disparities and improve outcomes for people affected by cancer by leading and coordinating national, evidence-based interventions across the continuum of care.

- 1800 624 973
- canceraustralia.gov.au

Cancer Council Australia

Cancer Council Australia is the nation's peak non-government cancer control organisation. Cancer Council undertakes a broad range of activities to provide up-to-date information about all aspects of living with cancer as well as cancer prevention. They offer free resources, including brochures, booklets and eBooks on cancer, and information and support for patients, their families and carers.

- 13 11 20
- cancer.org.au

About TAL

TAL is Australia's leading life insurance specialist, protecting people – not things – for over 140 years. Today, we insure more than 3.7 million Australians and in our last financial year we paid \$2.7 billion in claims to 39,628 customers and their families.

At the heart of the claims experience is you. Our goal is to help you lead as healthy and full a life as possible and help you get back to health as quickly as possible, taking into account all of your circumstances: your physical health, your mental wellbeing and your social support.

TAL's focused on your health

Health and wellbeing is at the heart of what we do. From your physical and mental health, to your social and financial wellbeing – helping you be the best you can be is our number one priority.

We want all Australians to live a life as healthy and full as possible, because that's what living this Australian life is all about. Our focus on your health begins when your cover does. Working with you to keep you well and supporting your return to health, with a personalised plan should the unfortunate happen and you suffer an illness or injury.

Because your health and wellbeing is as important to us as it is to you.

References

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Disclaimer

Claims statistics based on total claims paid under TAL Life Limited insurance products between 1 April 2021 and 31 March 2022. Claims statistics based on total number of accepted claims that were decided on between 1 April 2021 and 31 March 2022. A claim is decided on when a decision is reached as to whether or not the claim is payable.

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The TAL logo consists of the letters 'TAL' in a bold, sans-serif font. The 'T' and 'A' are joined together, and the 'L' is separate. The color is a bright green.