A Helping Handbook: Your Cancer Care Guide

at St. Vincent's University Hospital

St Vincent's UCD Cancer Centre

ST. VINCENT'S UNIVERSITY HOSPITAL
Elm Park

Foreword

It is with great pleasure that I introduce "A Helping Handbook: Your Cancer Care Guide" from St. Vincent's University Hospital. As Clinical Director of St. Vincent's UCD Cancer Centre, I know that a cancer diagnosis marks the beginning of a significant journey, and our commitment is to walk alongside you, providing the best possible care and support.

This handbook is more than just a collection of facts; it is a collaborative effort by our expert multidisciplinary team to bring together specialised knowledge and compassionate guidance. Our goal is to equip you and your family with the information and resources needed to navigate the complexities of cancer treatment and recovery.

From understanding the different healthcare professionals you may meet to tips for living well, this guide aims to empower you to be an active participant in your care. We encourage you to use this handbook as a valuable tool, a source of information, and a reminder that you are not alone on this path. Your well-being is at the heart of everything we do.

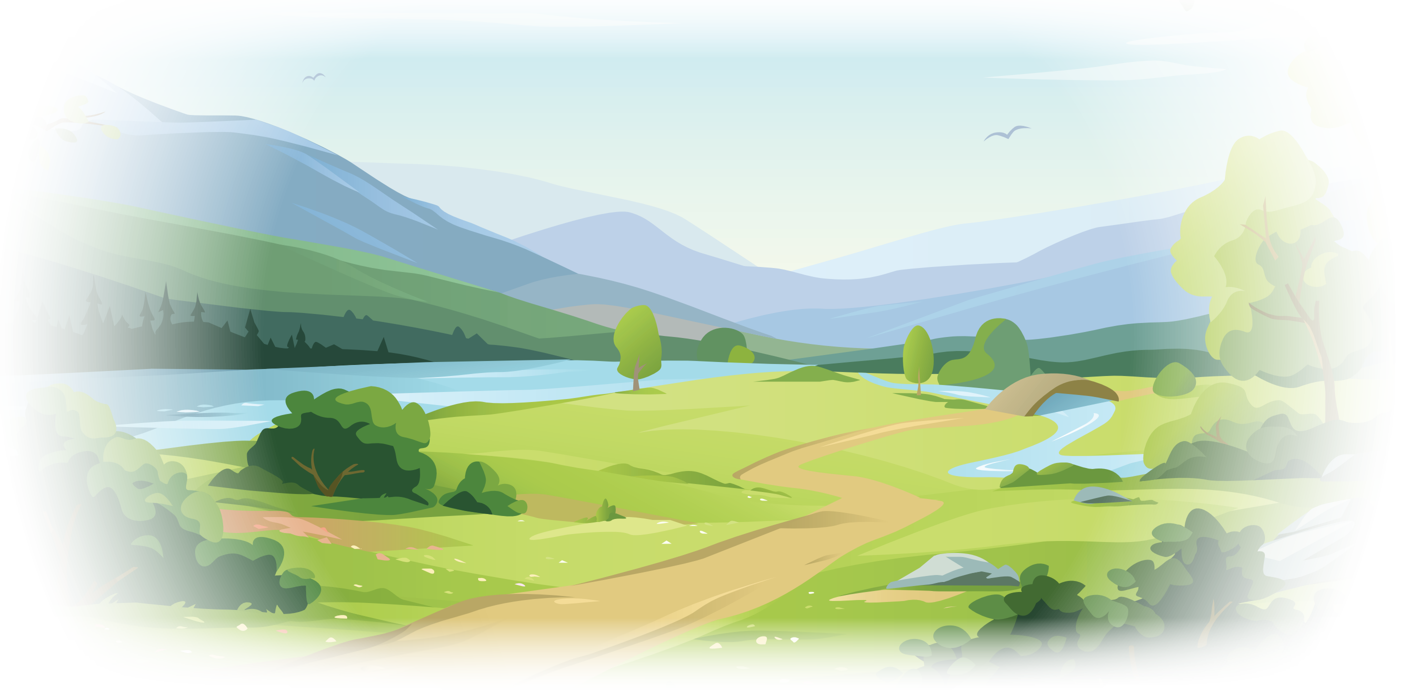
Dr David Fennelly,
Clinical Director of St. Vincent's UCD Cancer Centre

Content

Introduction to the Cancer Care Service

" It is not a straight road, this path we walk —
it bends through fog, climbs hills we didn't choose,
pauses at quiet places, and sometimes shines with unexpected light
You are not walking it alone."

— For the patient's journey



Welcome to the Cancer Care Centre at St. Vincent's University Hospital

The purpose of this cancer care booklet is to support patients and their families through cancer treatment and recovery.

Written by a multidisciplinary team of experts in cancer care, the booklet brings together specialised knowledge to provide support throughout the cancer journey.

It offers useful information on symptom management, emotional well-being, and offers practical resources to help patients and their families through their cancer journey.

By combining clinical experience with compassionate guidance, this booklet aims to help individuals facing cancer, so that they feel supported, informed, and prepared every step of the way.

Throughout your treatment journey you will receive care and support from different health care professionals who form the multidisciplinary team (MDT).

The following staff are the key members of the MDT:

Doctors

Medical Oncologists are Consultant Doctors with training and experience in the treatment of solid tumours (e.g. breast, lung, colon) with cancer drugs. **Haematologists** are Consultant Doctors with training and experience with cancers of the blood and lymph systems, such as leukaemia, lymphoma and multiple myeloma. Both specialties work with a team of Non Consultant Hospital Doctors (NCHD) who you may meet during your treatment.

While you have a primary consultant looking after you, other consultants may visit you during an inpatient stay to manage day to day care.

Physiotherapists

Physiotherapists support you to achieve optimal physical ability and remain independent and active. You may require a physiotherapist to help regain movement and avoid complications after surgery. A Physiotherapist can help, if you are having difficulties with your mobility or if you are struggling with certain symptoms such as breathlessness and pain.

Occupational Therapists

Occupational Therapists enable people to participate in their daily activities such as self-care and leisure activities. This can be done by modifying the task, the environment or the use of adaptive strategies. You might meet an Occupational Therapist if symptoms like fatigue, cognitive or physical changes are impacting your day to day function.

Dietitians

Dietitians specialise in providing evidence based nutritional care and guidance on eating well when you have cancer, whether it is before, during or after treatment. They also specialise in different feeding methods and can help to manage barriers to eating during treatment such as nausea, poor appetite, taste changes and changes in bowel pattern.

Psycho-Oncology team

Psycho-Oncology support people with the emotional and psychological impact of cancer. The team has staff from nursing, psychiatry, psychology and social work. The Psycho-Oncology team will explore how you are feeling and what kind of support you need.

The Palliative Care Team (Doctors and Nurses)

The Palliative Care Team focus on the prevention and relief of symptoms by assessing and treating pain and other physical, psychosocial or spiritual problems. Many people mistakenly believe that you can only receive palliative care when other treatments are no longer possible. However, palliative care can be provided to people of any age and at any stage of their illness. Providing palliative care at an early stage in a persons' illness can help to better manage symptoms and complications.

Medical Social Workers

Medical Social Workers assist in providing emotional support, counselling, and practical assistance to patients and their families. They help patients cope with the psychological, social, and financial challenges associated with a cancer diagnosis, treatment, and survivorship.

Nursing Team include:

Clinical Nurse Managers, Registered Nurses, Clinical facilitators, Clinical Nurse Specialists, Nursing students and Health Care Assistants.

Clinical Nurse Managers

Clinical Nurse Managers oversee the care of patients, manage nursing staff, and undertake managerial and leadership roles.

Staff Nurses

Staff Nurses who are working in the cancer centre are trained in cancer care. Their role includes assessment, education, advice and support for patients from diagnosis through to survivorship and to follow up care. Nursing roles are diverse and include administration of therapies in hospital, management of patient symptoms resulting from cancer and its treatments and the delivery of supportive care.

Clinical Nurse Specialists, Advanced Nurse Practitioners & Research Nurses

Clinical Nurse Specialists, Advanced Nurse Practitioners and Research Nurses specialise in particular cancer types and areas. They will provide advice, support and information around the different investigations you may have to go through and will give support and guidance about your treatment plan. You will be given written information and contact details about your team and their working hours.

Pharmacists

Pharmacists ensure that you are prescribed the correct medication during your treatment. They can advise you on how best to manage side effects and help you to understand your medications. You can ask the Pharmacist about how you should take your medications so they are most effective.

Speech & Language Therapists

Speech & Language Therapists provide assessment and management of speech, swallowing, voice and communication problems that may arise during a patient's cancer journey. They can provide specialised swallowing assessments and advise in tracheostomy and laryngectomy management.

Chaplains

Chaplains are pastoral care practitioners who offer a compassionate, listening presence attending to your emotional and spiritual well-being.

If you need support with your religious and or cultural needs please contact the chaplain on duty or any member of Nursing/MDT.

Tips for living well during cancer treatment

EMPOWER YOURSELF

Inform yourself of your diagnosis from reliable sources. Ask your medical team if you have any questions. Bring a pen and notebook to appointments. It might be helpful to write down any questions you have before your appointments.

EAT WELL

Cancer and cancer treatments can make eating difficult: you might not feel hungry or not be able to eat enough. It's important to try to eat well during cancer treatment because it helps to:

- Provide your body with the nutrition it needs to recover during treatments
- Support muscles to stay strong
- Maintain weight
- Provide you with energy

Maintaining your weight and avoiding weight loss can improve your quality of life, so try to:

- Choose foods that are rich in protein to help your body maintain muscle and repair tissue
- Include carbohydrate foods at each meal to sustain weight and energy
- Stay hydrated. Drink plenty of fluids during the day.
- Even if you are overweight avoid losing weight unless advised to by a healthcare professional. This will support your body through the challenges of treatment and support maintaining muscle mass.

REMAIN ACTIVE

Being active can help improve your physical and mental wellbeing. Little and often throughout the day can make a positive difference. Activity helps to:

- Improve appetite & digestion
- Improve mood
- Reduce fatigue
- Improve your tolerance to treatment
- Reduce side effects of treatment

SLEEP WELL

Try to:

- Create a relaxing routine around bedtime
- Limit naps during the day
- If you're struggling to sleep, leave your bed and do something until you feel tired

CONNECT WITH OTHERS

Connecting with others is important in many ways. Connection supports our emotional and psychological wellbeing. It can also help with practical supports you may need. When thinking about connecting with others:

- Try to be honest with the people in your life. Let them know how you feel and what your wishes are. That includes your loved ones and the professionals involved in your care.
- Try to express your emotions honestly. It may be hard to do at first if you're not used to sharing how you feel. But, by sharing how you feel, you and the people around you can gain strength from each other.
- If you need support, contact your local cancer support centre/national organisation (see Section 8)

ACCEPT HELP

Family and friends often want to support you. Getting them to help with practical tasks can make things easier for you and makes them feel useful.

THINK ABOUT YOURSELF

There is 'no one size fits all' when it comes to living with cancer. Each person's experience of cancer treatment is unique to them. Everyone copes in their own way and there is no right or wrong way to cope. Find what works for you. Remember to prioritise what's important to you.

A-Z OF SYMPTOMS YOU MIGHT EXPERIENCE DURING TREATMENT

- ACTIVITY
- APPETITE
- BODY CHANGES
- BOWEL HABIT
- BRAIN FOG
- EMOTIONAL IMPACT OF CANCER
- FATIGUE
- HAIR LOSS
- INFECTION RISK
- LYMPHOEDEMA
- MOUTH CHANGES
- NAUSEA & TASTE CHANGES
- PAIN
- PERIPHERAL NEUROPATHY
- SEXUALITY AND FERTILITY

I. ACTIVITY

There is a growing body of research which shows that being physically active is safe and helpful before, during, and after cancer treatment. Physical activity can help to:

- Improve physical function (how well you can use your body to do things) e.g. shopping, dressing, meeting friends
- Reduce cancer-related fatigue (tiredness)
- Improve tolerance to cancer treatment
- Reduce symptoms of anxiety and depression
- Improve sleep
- Improve quality of life
- Support return to usual activities

A change in routine can affect our energy levels. This is particularly true during cancer treatment.

Remember, physical activity is not the same as sport. It does not require you to go to the gym or to use any special equipment. It can take the form of using the stairs more often or parking further away from the shops.

If you had an active lifestyle when you were diagnosed and you have good energy levels – keep it up!

If you were not active before your diagnosis, it is best to start gradually and build up as you are able.

People with cancer are advised to avoid inactivity. The type of exercise you do will depend on your stage of cancer treatment. It will also depend on which activities you enjoy and your level of fitness. Gentle movement breaks throughout the day are good for your body and mind.

Where to begin?

If you are new to exercise or returning to activity after treatment, speak with your Doctor to make sure they are happy for you to start a new exercise plan. If you have been inactive for a long time, start with short sessions (10 to 15 minutes). Try to build up your activity over time by adding on a few minutes each week.

If you are feeling well enough, try work towards:

- Aerobic exercise 3-5 times per week for 30 minutes – this is a type of exercise that increases your heart rate (walking, dancing, using the stairs, gardening)
  Borg Scale: Aim to work towards Green 4-6
- Resistance exercise 2 times per week working all major muscle groups (lifting weights, carrying heavy shopping bags)

Borg Scale (Rate of Perceived Exertion)	
1	**Very light activity.** It doesn't even feel like you're exercising.
2-3	**Light activity** You could keep going for hours! It's easy to breathe and have a conversation.
4-6	**Moderate activity** You're breathing heavily, but you can have a conversation.
7-8	**Somewhat difficult activity** You're short of breath. You can speak, but only about one sentence at a time.
9	**Very difficult activity.** You can barely breathe, and can only say a few words at a time.
10	**Maximum effort activity** You're completly out of breathe, and can't talk.

You may not be able to exercise as you normally would if you have an infection or your blood count is low. During radiation therapy, sweat may irritate your skin due to skin breakdown - try to keep your skin dry to avoid irritation.

It is important to seek medical advice if you experience any new symptoms such as pain, chest discomfort or changes in feeling in your arms or legs.

Sarcopenia is the medical term for losing muscle and function. It is common as people get older. The effect of cancer and its treatments can make this worse.

Exercise along with a protein rich diet can help to maintain and build muscle strength. This can help to keep you stronger for treatment.

Be active		**Build Strength**	**Improve Balance**
Keep your heart and mind healthy		Strengthen muscle, bones and joints	Reduce your risk of falling
HOW OFTEN? **150** minutes of moderate activity a week **or 75** minutes of vigorous activity a week		**2** days a week	**2** days a week
Walk	Run	Gym	Dance
Gardening	Sport	Aerobics	Tai chi
Swim	Stairs	Carry bags	Bowling

SIT LESS TV Sofa Computer

Break up long periods of sitting down to help keep your muscles, bones and joints strong.

II. APPETITE

If your appetite is poor:

- Try to ‘Eat little and often’
- Aim for 4-6 small nourishing meals/ snacks per day
- Eat when your appetite is at its best i.e. if you have a good appetite in the morning, eat a good portion of food then, or if you can eat more in the evening try to optimise your intake at this time
- Include a protein rich food at each meal e.g. eggs, meat, fish, cheese, lentils, beans, tofu, nuts, high protein yoghurt
- Fortify foods by adding extra protein and calories to your meals e.g. grated cheese/ skimmed milk powder/ chopped nuts and seeds to potatoes/ porridge/ pasta /omelettes/ soups/creamed rice/yogurt/salads
- Try Nourishing Fluids: Use full fat milk or high protein milks. If using plant milks, choose fortified soya milk or a plant based milk fortified with vitamins and minerals. Make ‘cup a soup’ with hot milk instead of water.
  Swap black tea or coffee for milky tea, lattes, cappuccino, hot chocolate or milkshakes.
  Swap fruit cordial for fruit juice or smoothie drinks

* Your GP or Dietitian may recommend oral nutritional supplements if you are experiencing ongoing weight loss or a reduced appetite

* If you have pre-existing conditions that impact your diet please speak with your Dietitian or team

If appetite is excessive and weight gain experienced:
(which can be common with certain treatments), try to:

- Regulate eating times – try to avoid unscheduled snacks
- Avoid high sugar foods – these may encourage you to eat more
- Choose wholegrain/ wholemeal foods e.g. breads/ rice/ pasta/ breakfast cereals (these can keep us feel fuller for longer)
- Consider taking fluids e.g. water/ herbal tea if craving foods
- Distract yourself if frequent cravings e.g. knitting/ crossword/ walk/ leave the kitchen
- Choose lower calorie foods e.g. fruit to keep you going until the next planned meal

III: BODY CHANGES

All of us have a mental picture of how we look, our “self-image.” Although we may not always like how we look, we are used to our self-image and accept it. But cancer and its treatment can change how you look and feel about yourself. It also can affect your sex life, which is hard to cope with too. You are not alone - many others have similar feelings and experiences.

Every person has different changes in their body due to cancer treatment, and you may need time to adjust. Issues you may face include:

- Hair loss
- Skin changes
- Scars or other changes caused by surgery
- Weight changes
- Loss of limbs
- Stoma or drains
- Loss of fertility

How to manage body changes:

- Know that it is okay to feel sad, angry, and frustrated. Your feelings are real, and you have a right to grieve.
- If your skin has changed from radiation or other treatments, ask your team about ways you can care for it or ask for a referral to a dermatologist.
- Look for new ways to enhance your appearance. A new haircut, hair colour, makeup, or clothing may give you a lift. If you're wearing a wig, take it to a salon where they can shape and style it for you.
- Join a support group or talk to other patients for advice. (See Section 8)
- If you wear a prosthesis (e.g. breast or limb), make sure it fits you well.

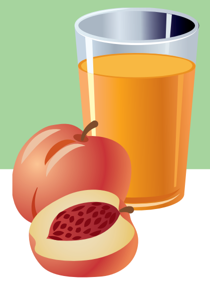
Coping with these changes can be hard. But with the passage of time and help from others, many people adjust to them. Also, some changes may be temporary.

IV: BOWEL HABIT

Bowel habit changes can occur during treatment. It is important to discuss any bowel issues with your team. See below for some helpful tips:

Managing constipation

- Try to increase your fibre gradually by adding fruit, vegetables, wholemeal or wholegrain labelled foods, adding flaxseed to cereal or yoghurt
- Consider increasing your fluid intake
- Try prune juice or fruit juice (may get a better effect on an empty stomach)
- Increase your physical activity
- If no improvement speak with your team who may advise laxative treatment



Managing Diarrhoea

- Stay hydrated by drinking regular fluids throughout the day
- If you are experiencing ongoing diarrhoea, discuss with your team or local Pharmacist who may recommend an electrolyte solution
- Reducing or avoiding certain foods may help: green vegetables, beans, fruits, wholemeal/ wholegrain foods, fatty foods, caffeine, alcohol, fruit juice
- Choosing low fibre energy foods such as white pasta/ rice/ bread rather than 'brown' versions can help
- Try eating smaller portions regularly

V: BRAIN FOG

Brain fog can also be called cancer related cognitive impairment, chemo brain/fog or cancer related cognitive changes. These terms describe the changes in brain function you might experience with cancer or cancer treatments. This can happen even when the cancer is not directly impacting the brain. Most people experience changes with cognitive function after treatment. These changes are generally subtle and resolve within 1 year. However, in some cases it can be longer. These subtle changes may not be obvious to your family, friends or healthcare professionals. Keeping a record of your cognitive changes can help you to explain or communicate the difficulties you experience and can help your team to support you. Although changes are subtle, they can have a big impact on daily function.

Impact of Brain Fog:

- Memory: difficulty with remembering details such as names, dates, new information or you may find yourself misplacing objects.
- Concentration: maintaining attention on activities or switching attention between multiple tasks can be tricky. Reading a book, following a TV programme, socialising or completing work related tasks can be difficult for some people.
- Difficulty or slower information processing: feeling like your thoughts are sluggish or taking longer to process information.
- Managing day to day life: this can impact your ability to plan out or organise tasks. Regulating emotions, making decisions or meeting deadlines can be more difficult.

These changes can make daily tasks difficult. Particularly tasks that require a lot of brain power, such as work and household management.

Tips for managing Cognitive changes:

- Using a diary: tracking your challenges with cognition can help to identify stressors or what helps your cognition. It can also track changes or improvements over time and highlight times of the day/week where cognitive function is better. This can help with planning when to take on tasks that are more cognitively challenging.
- Minimise distractions: if you are struggling with attention: Try to focus on one task at a time and avoid trying to complete multiple tasks at once. Try to work in quiet environments and avoid having the TV or radio playing in the background as this can challenge our attention.
- If you work in a shared office a visual reminder (such as a 'do not disturb' sign) to colleagues to minimise interruptions can be helpful. Headphones can also be a visual cue for others not to disturb you, and this minimises the impact of noises in the environment.
- Having an organised environment can help.
- Use external aids: using lists, planners and post-it notes can be helpful to remind you of important information, dates or appointments. Leaving a notepad beside the telephone can be useful to record information from phone calls. There are also "notes" and planner apps available on phones and laptops that may be helpful.
- Routines: establish clear daily routines, allow more time for tasks that require cognitive function and take frequent breaks.

- **Cognitive exercises/ strategies:** repetition, talking aloud, visualisation (creating a mental image of what you need to remember), association (linking new information with something familiar) and mnemonics.
- **Lifestyle factors:** as the causes of cognitive changes can be impacted by multiple lifestyle factors it is important to try to get adequate sleep, nutrition and exercise in line with your own abilities.

VI: THE EMOTIONAL IMPACT OF CANCER

Receiving a cancer diagnosis can bring a wide range of emotions, and it's completely natural to experience distress at times. Everyone processes this news differently, but know that you are not alone. Support is available to help you navigate this journey.

Common emotions for people with cancer include:

Shock
It's normal to feel numb or overwhelmed as you take in your diagnosis. Some people need time to absorb the news, and that's okay. Be patient with yourself and give yourself space to adapt. Taking things step by step can help you regain a sense of control.

Anger
Feeling angry or frustrated is a natural response. Acknowledging these feelings can help you process them in a healthy way. Finding helpful outlets, like talking to a loved one or engaging in physical activity, may provide relief.

Worry
Concerns about treatment, changes to your body, or the future are understandable. When worry feels overwhelming, try to focus on what you can control—such as following your treatment plan and seeking support from those who care about you. If anxiety becomes too intense, professionals like Doctors or members of the Psycho-Oncology team can help you find effective ways to manage it.

Sadness
Feeling sad is part of adjusting to life's changes. You might grieve the loss of your pre-diagnosis life or feel uncertain about the future. Allow yourself time to process these feelings, and know that healing is a journey. Support from loved ones or professionals can make a big difference.

Loneliness
Even with people around you, you might feel like no one truly understands your experience. Connecting with support groups, other cancer survivors, or a trusted friend can help you feel less alone. There are people who want to support you—reach out when you need to. If you are struggling with loneliness speak to a Medical Social Worker for emotional support.

Hope and Support
If sadness or worry becomes overwhelming and starts affecting your daily life, know that help is available. Speaking with a medical professional, community cancer support service, or a Psycho-Oncology specialist can provide valuable tools to help you feel more in control. You don't have to go through this alone.

Finding Your Own Way to Cope

Everyone's journey with cancer is unique, and there is no "right" way to cope. Some people:

- Find strength in supporting and protecting their loved ones
- Lean on family, friends, or support groups for encouragement
- Reflect on how you have managed difficulties in the past
- Draw comfort from faith or personal beliefs

Whatever approach feels right for you is the best one. Be kind to yourself, and don't compare your journey to others. Sharing your feelings with trusted people can help you feel more connected and supported.

Remember, you are not alone—there is hope, help, and a community ready to stand with you. ❤

VII: FATIGUE

Fatigue can be described as a sense of exhaustion / tiredness that is not explained by recent activity levels. It is experienced by a lot of people with cancer and can impact on physical, emotional and cognitive function. It can be caused and impacted by a lot of things: the cancer itself, treatment, lack of activity, stress or pain.

While fatigue is very common, it is different for everyone and can vary day to day. Sometimes fatigue can happen after a treatment (e.g. the week after chemotherapy or following radiation therapy) and last for a short time. Other times fatigue can last longer and have more of an impact on daily activities including self-care, leisure and work activities.

Impact of fatigue:

- Difficulty with small activities that you normally can do: from brushing your hair to showering
- Feeling weak, dizzy or lighthearded
- Difficulty with thinking, making decisions or keeping your concentration
- Feeling sad
- Trouble sleeping

Managing Fatigue

1. Sleep:

Fatigue can make you want to sleep all day which can interrupt your sleep at night time.

Create a good routine before bedtime – avoid screens and try to create a calm environment to help you unwind. Keep your bedroom for sleep only and try going to bed and waking up at around the same time.

Ways to improve your sleep

Morning	• Stick to a sleep schedule so you wake up around the same time every day. • Limit caffeinated drinks to early in the day.
Daytime	• Avoid naps longer than one hour and naps close to bedtime. • If possible, nap somewhere other than your bed. • Move your body or exercise throughout the day. • Exercise more than three hours before bed to allow time for your body to wind down.
Anytime	• Relaxation techniques like yoga and meditation can help you relax. • Other soothing activities can include reading or listening to music. • Cognitive behavioural therapy can help you develop better sleep habits.
Evening	• Create a bedtime routine that helps you decompress from your day. • Use your bed for sleeping and intimacy only. • Avoid heavy meals and fluids near bedtime.
Nighttime	• Stick to a sleep schedule so you go to bed around the same time every night. • Do not use electronic devices 20 to 30 minutes before bed. • Practice relaxation techniques before bed like meditation, breathing exercises, and/or massage. • Go to bed when you feel sleepy. • Have a dark and quiet sleep environment with a comfortable temperature. • If you don't fall asleep within 20 minutes, try a relaxing activity or getting out of bed and returning when you feel sleepy.

Source: National Cancer Institute
cancer.gov/nci-connect

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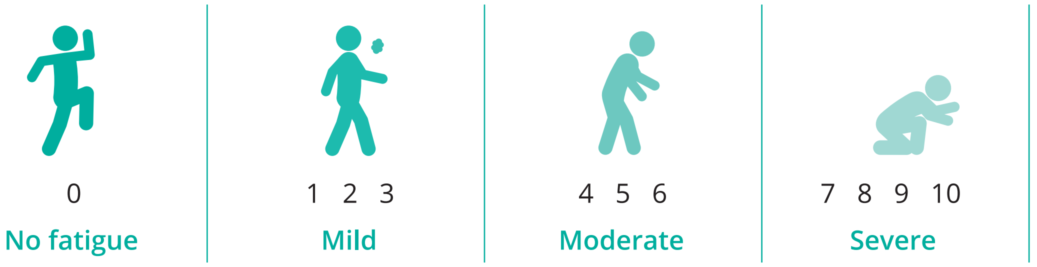
2. Keep a fatigue diary:

Track your activity and fatigue levels. This can help highlight what causes and helps manage your fatigue.
It can also be a useful tool to help you communicate about your fatigue to your health care professionals.

Rating your fatigue from 0-10 can be helpful.

- 0-3 is mild fatigue
- 4-6 is moderate fatigue
- 7-10 is severe fatigue



Activity & Fatigue log

List activities you have completed during the morning, afternoon and evening (include any activity such as personal care tasks like washing and dressing, work related or social tasks).

Rate the fatigue you felt after these tasks on a scale of 1-10

Day	Morning Activity	Fatigue level 1 – 10	Afternoon Activity	Fatigue level 1 – 10)	Evening Activity	Fatigue Level 1 – 10
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

3. Energy Saving Strategies:

These strategies include the 4P's: planning, pacing, prioritising and positioning.

1

Planning

Plan out your day/week in advance. Can you spread out the activities you would normally do? If certain activities take more of your energy consider what time of the day you do them, and how long they might take. Try to be flexible because things may not always go to plan.

2

Pacing

Give yourself lots of time for activities, which will allow breaks as needed. Try not to rush. Do not work to the point of exhaustion. Pushing into exhaustion takes longer for your energy to recover. Consider breaking tasks into smaller parts.

3

Prioritising

Decide what activities are important to you and prioritise them. Consider asking friends, family or community services for help with other tasks (to cook meals or get shopping in). This will save your energy and free you up to prioritise activities more important to you.

4

Positioning

Consider your position when completing a task. Could you do it sitting down? Try to avoid tasks that you need to maintain a bent or squatting position, bad posture can use more of your energy.

4. Support:

Fatigue can be difficult to manage and at times it might feel like people don't understand what you are experiencing. Ensuring you have support with managing your fatigue is really helpful. Being able to effectively communicate your fatigue and how it impacts you to others can be an important part of feeling supported with your fatigue.

Consider joining support groups with other people experiencing cancer related fatigue. There are online and in person groups available - contact your local cancer centre for details of what is available near you.

5. Eat Well with regular and nourishing food or fluids:

- Don't be afraid to ask family or friends for help with shopping, preparing and cooking meals
- Consider online shopping if possible
- Prepare meals in advance, bulk cook and freeze extra portions for days when your energy is low
- Consider Meals on Wheels services, frozen meals and/or tinned foods
- Small meals can be more easily managed such as: beans or scrambled egg or fried eggs on toast, baked potato with tuna mayo/ beans and cheese, nourishing soups/ crackers and cheese
- Softer foods can be easier to eat as less tiring to chew
- Nourishing fluids can also be easier than foods e.g. milk based drinks like hot chocolate or milkshakes. Oral Nutrition Supplements can be purchased in a pharmacy or prescribed by your Doctor or recommended by a Dietitian
- Keep snacks available: nuts, cheese, yoghurt, custard pots, creamed rice pots for when you feel hungry

VIII: HAIR LOSS

Certain cancer treatments can make you lose some or all of your hair. This usually starts 3–4 weeks after starting treatment, although it may occur earlier. You may also have thinning and loss of eyelashes, eyebrows and other body hair. This is temporary and your hair will start to grow again once the treatment has finished. Your hair may grow back straighter, curlier, finer, or a slightly different colour than it was before. Whether your hair is just starting to fall out, or is beginning to grow back, here are some tips which may help:

- Be gentle when brushing and washing your hair. Use a mild shampoo (such as baby shampoo) to wash your hair.
- If your scalp is exposed, use a broad-spectrum sunscreen with an SPF of at least 30. In cold weather, wear a hat or scarf to cover your head and stay warm.
- Scalp cooling or cold cap may be effective to reduce scalp hair loss for certain cancer treatments
- Various options for hair pieces and accessories are available
- Ask your cancer care team about your specific cancer treatments and what to expect.

IX: INFECTION RISK

Some types of cancer and treatments may increase your risk of infection. This is because they lower the number of white blood cells (neutrophils), the cells that help your body to fight infection. You will have blood tests to check for neutropenia (a condition in which there is a low number of neutrophils).

Reduce your risk of infection by:

- Washing your hands often and well
- Staying away from people who are sick or have a cold
- If possible, avoiding crowded indoor settings. Consider wearing a face mask

Food safety advice

- Having an increased risk of infection can also mean an increased risk of food poisoning
- Take extra care preparing, storing and cooking food to prevent this
- Wash your hands before and after you handle any food
- Check best before dates on foods or drinks
- Wash all raw fruits and vegetables well
- Store food as per food packaging guidelines
- Be careful with reheating and eating leftovers

X: LYMPHOEDEMA

Lymphoedema is swelling of a body part following disruption of the lymphatic system.

Tips for self-managing lymphoedema:

Exercise & movement

Using your muscles while exercising helps reduce swelling by moving fluid and keeps your joints supple. Exercising is safe in those with or at risk of cancer-related lymphoedema. However, it is important to remember that swelling may increase if you exercise too quickly, too often or for long periods of time. Elevation of the limb using foot rests or pillows can help reduce swelling.
If you have a compression garment, you usually need to wear it when you exercise.

Nutrition

While there is no specific diet to control lymphoedema, certain dietary choices can help manage symptoms and support overall health. Focusing on maintaining a healthy weight and preserving muscle mass are particularly important, as excess weight can put added strain on the lymphatic system, while muscle loss can affect mobility and strength.

Key dietary considerations for Lymphoedema include:

- **Lower salt intake –** Excess salt can cause fluid retention, potentially increasing swelling.
- **Stay hydrated** – Drinking enough water helps maintain lymphatic flow and overall hydration.
- **Limit alcohol and caffeine** – Both can contribute to dehydration and may affect fluid balance.
- **Maintain muscle mass** – Prioritise protein-rich foods to support muscle strength and recovery.
- **Focus on balanced nutrition** – Eating a variety of whole foods, including fruits, vegetables, lean proteins, and whole grains, can help regulate inflammation and support overall well-being.

You should stop exercising and seek advice from your team if:

- You have a skin infection (cellulitis)
- The swelling gets worse
- Your skin becomes red, sticky and hot

Skin care

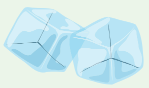
- Where possible, protect yourself from injuries to the skin such as cuts, scratches and muscle strain
- Be sun safe to avoid sunburn
- Avoid getting injections, needles or your blood pressure taken on the affected limb

XI: DRY MOUTH, SORE MOUTH OR PAIN ON SWALLOWING

During cancer treatment, maintaining good oral care helps to prevent infections and sores as well as managing side effects like dry mouth and changes in taste.

- Special mouthwashes and gels are available to help manage dry mouth. Speak with your Doctor, Pharmacist or your Nurse Specialist for more specific recommendations – avoid mouthwashes containing alcohol

- Take regular sips of fluids throughout the day
- Try suck on ice pops, frozen fruit (e.g. pineapple), boiled sweets or ice cubes



- Keep your lips moist with lip balm
- Chew gum or boiled sweets to help stimulate saliva

- Add extra sauce to meals or choose soft meals such as stews, soups, casseroles which need less chewing

- Use a soft toothbrush

- Avoid rough textured food e.g. toast/ pizza/ crispy pasta/ crackers/ grainy or rough brown breads

- Avoid salty, spicy, tart or vinegar foods
- Consider drinking from a straw if sore mouth
- Choose nourishing fluids e.g. full fat milk, milkshakes

- Choose foods such as yoghurt, ice cream, custard, creamed rice for ease of swallow
- Avoid flaky foods which may stick to your mouth e.g. croissant/ scones/ pastries
- Speak with your team/ Dietitian to recommend a nutritional supplement if needed

XII: NAUSEA & TASTE CHANGES

Nausea is a common side effect of treatment, and for some can be related to emotion such as stress and anxiety.

Try the following tips:

- It is important to take anti-sickness medications as directed to help prevent nausea from occurring, don't wait until you feel sick
- Eat small portions of food often
- Avoid missing and skipping meals as this can worsen symptoms
- Cold foods generally have little smell and may be easier to tolerate than hot foods
- Try dry/ bland foods such as toast/crackers /dry cereal/ potatoes/ pasta or biscuits
- Ginger may help to reduce nausea e.g. ginger tea/ biscuits/ cake
- Let your team know if you are feeling nauseous and struggling to eat

Taste Changes:

- Taste changes can be caused by the cancer itself or be a side effect of treatment or medication. You may find foods tasting metallic, bland or generally unpleasant.

Tips to help:

- Try new foods
- Try foods previously disliked as they may taste different now
- Aim to keep your mouth clean and fresh
- Before eating rinse your mouth with salt water or baking soda or prescribed mouth rinse
- Chewing fresh or tinned pineapple before meals can rid bad tastes
- Suck on mints/ boiled sweets

Helpful Hints

Lack of taste	Try marinating your meats or fish	Use herbs and spices to flavour foods	Try sweet or salty foods for better taste
Metallic taste	Try plastic cutlery	Limit intake of canned foods/ drinks/ cooking with metal pots	Red meat usually tastes more metallic compared with white meat
Over powering flavours	Cook with foods that develop little flavour e.g. pasta, rice, potatoes	Cold foods may be better tolerated	If using 'ready to eat' products choose those with little salt (less than 0.3g of salt per 100g)

XIII: PAIN

Many people with cancer will have pain at some point in their illness. But for most people, pain can be managed using:

- Different medicines
- Non-drug treatments and complementary therapies such as physical therapies and relaxation techniques

How much pain someone has is not related to how advanced the cancer is. Pain is very personal and everyone's experience with pain is different. Two people with the same type of cancer may have different amounts of pain.

Pain does not always get worse as cancer develops. Some people may never have pain. But pain is more common in people with advanced cancer.

There are many different types of pain and many different treatments for pain, including medicines, physical therapies, complimentary therapies, relaxation therapies, specialised pain treatments such as numbing injections, and the cancer treatment itself.

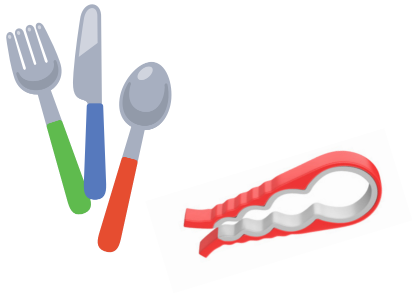
It is important to let your medical team know if you are using any of these therapies, including over-the-counter medicines and herbal remedies, as these may interfere with your cancer treatment.

Ask your Doctors and Nurses about your pain so that it can be managed in the way that best suits you and your situation.

XIV: PERIPHERAL NEUROPATHY (Nerve Damage)

Some cancer treatments can cause damage to the nerves in your feet and hands. It can affect the sensation of the skin (you may feel tingling, numbness, burning or pins and needles). It may also lead to weak or achy muscles and affect your balance and mobility.

Peripheral neuropathy can impact how you use your hands in day to day tasks. If you are experiencing difficulty with tasks like using a knife and fork or preparing meals, using small aids may be helpful. For example, cutlery with a wider/bigger grip can be easier to use, and non-slip jar openers can be helpful.



Ways to manage problems related to peripheral neuropathy:

- Protect your feet by wearing footwear indoors and outdoors
- When it is cold, wear gloves and warm socks to protect the skin
- Check your skin daily for cuts and scratches
- Slow down and give yourself more time to do tasks and ask for help with heavy/difficult tasks
- Be careful with hot surfaces if you are experiencing numbness in your hands

XV: SEXUALITY AND FERTILITY

It's common for people to have problems with sex because of cancer and its treatment. Sexual problems can last longer than other side effects of cancer treatment. Until then, you and your spouse or partner may need to find new ways to show that you care about each other. This can include touching, holding, hugging, and cuddling.

Treatment-related sexual problems

Sexual problems are often caused by changes to your body. Depending on the cancer you have/had, you may have short-term or long-term problems with sex during and after treatment. These changes result from chemotherapy, radiation, surgery, or other medicines that are used to treat cancer. Sometimes emotional issues such as anxiety, depression, worry, and stress may cause problems with sex.

What types of problems occur?

- **Worries about intimacy**. Some people may struggle with their body image after cancer treatment. Some worry that they won't be able to perform or will feel less attractive. Hair loss or being seen without clothes may also be stressful to some. Your body may look and feel differently and this may affect your ability to be intimate with your partner.
- **Changes in your sex drive.** Pain, worries that sex will hurt, feeling bad about your body, loss of interest, depression, and some medicines are just some examples of what can affect sex drive.

- **Changes in your sex organs.** Some cancer treatments cause changes in sex organs, such as:
    - Some men can no longer get or keep an erection after treatment for prostate cancer, cancer of the penis, or cancer of the testes.
    - Some treatments can weaken a man's orgasm or make it dry. Less common problems include being unable to ejaculate or ejaculation going backward into the bladder.
    - Some women find it harder, or even painful, to have sex. Some women also have pain or numbness in their genital area or changes in sensation. While some cancer treatments can cause these problems, there may be no clear cause.
- **Having menopause symptoms**. Some treatments/ medication can result in hot flashes, dryness or tightness in the vagina, and/or other problems that can affect their desire to have sex.
- **Losing the ability to have children.** Some cancer treatments can cause infertility, making it impossible for cancer survivors to have children. But keep in mind that:
    - Depending on your age, the type of treatment you received, and the length of time since treatment, you may still be able to have children.
    - Families can come together in many ways. Some people choose adoption or surrogacy. Some people get involved in the lives of nieces or nephews, or in child mentoring programs.
    - You may choose to focus on other interests and passions in life.
    - You can reach out to your health care team with questions or concerns

Even though you may feel awkward, let your Doctor or Nurse know if you're having problems with intimacy or sex. If your Doctor can't talk with you about sexual problems, ask for the name of a Doctor or other expert who can.

Some potential solutions are:

- **Erection problems.** Medicine, assistive devices, counselling, surgery, or other approaches may help.
- **Vaginal dryness.** Dryness or tightness in the vagina can be caused by menopause. Ask whether using a water-based lubricant during sex, using vaginal dilators before sex, and/or taking hormones or using a hormone cream are options for you.
- **Muscle weakness**. You can help strengthen muscles in your genital area by doing Kegel exercises. This is when you practice controlling your muscles to stop the flow of urine. You can do these exercises even when you are not urinating. Just tighten and relax the muscles as you sit, stand, or go about your day.

PRACTICAL SUPPORTS

Cancer and your wider network

Cancer will affect other people in your life and this will also affect you. You may feel that your family or friends are avoiding you or avoiding talking about the cancer. This is usually because they are also finding it difficult to cope. They may be finding it difficult to find the right words. They may be frightened of causing you distress or upset.

Try to tell them how this makes you feel. It may help you, your family and friends to talk openly about how you are feeling.

We understand that other difficulties may arise outside of your cancer diagnosis, life stressors related to family or finance and you may wish to avail of support through Medical Social Work and/or Psycho-Oncology services.

We can also signpost you to the relevant local cancer support services in your community (see Section 8 for details).

Children

You may be worried about the effects your cancer diagnosis could have on your children regardless of their age. You might feel apprehensive or overwhelmed when initiating these types of discussions with those you love. The Medical Social Worker can provide age appropriate information, and support a parent or a caregiver regarding these sensitive discussions.

CLIMB is a support programme dedicated to helping children cope with a parent's cancer diagnosis.

CLIMB stands for Children's Lives Include Moments of Bravery. It is a 6 week programme.

CLIMB is for children of primary school age from 5-12 years who are experiencing the impact of a parent's cancer diagnosis.

The aim of this programme is to support a child's ability to cope with feelings associated with a parent's cancer diagnosis.

Therapeutic art and play exercises are used to help support children expressing their feelings.

Feelings such as sadness, anxiety, anger are all normal feelings that are likely to arise, and the aim of CLIMB is to express these feelings in a healthy way.

Through this programme the aim is to increase children's knowledge about cancer as well as support further discussions between parents and children.

The Medical Social Work Department can provide further information on this programme.

Home Care Packages

Following a prolonged admission, you may find that you now require additional supports in your home to be set up prior to discharge home. You could feel weaker and fatigued post chemotherapy treatment and may need assistance with tasks in the home. Your social worker can meet with you to discuss what level of care you may require. Your social worker will then complete the paperwork with you on the ward and send a referral to your local HSE Home Supports Office. The hours approved to you will be based on a care needs assessment and will focus on specific tasks that you may need assistance with.

The maximum hours granted per week is 21 hours and is care needs based. Carers do not assist with housework but will help with practical tasks like washing and dressing, meal preparation and medication prompting/supervision. If your Home Care Package is not essential to be in place prior to discharge a Public Health Nurse referral can be sent and they will assess you when you are discharged from the hospital and at home. If there is a delay in initiating a home care package, convalesance can also be arranged.

Meals on Wheels

This is a voluntary service based in your community, where a nutritious meal can be delivered to your home. The Public Health Nurse or social worker in the hospital can make a referral to your local Meals on Wheels.

Future Planning

How can I ensure my wishes and preferences are fulfilled?

You can detail your wishes in a will and by setting up an **Enduring Power of Attorney (EPA)**. An EPA is a legal document that appoints a person to oversee your financial and/or personal affairs in the event you no longer have the mental capacity to do so yourself.

An **Advanced Healthcare Directive** is a statement you can draw up outlining your will and preferences about medical treatments that may arise in the future. This includes what treatments you do not want and can be legally binding. Similar to the EPA, it is only activated in the event you no longer have the capacity to make decisions.

A useful resource is the **'Think Ahead Planning Ahead Pack'**. This can be used to record your wishes and preferences for future care, and can be shared with your family and medical professionals involved in your care. 'Think Ahead' documents are available from the Medical Social Worker or the Irish Hospice Foundation.

The Assisted Decision-Making (Capacity) Act 2015

The Assisted Decision-Making (Capacity) Act 2015 in Ireland provides a legal framework to support individuals who may have difficulty making decisions due to intellectual disability, mental illness, or conditions like dementia. It promotes autonomy by allowing people to make decisions as much as possible while providing different levels of support based on their needs.

These include:

(1) Decision-Making Assistance, where a person receives support from a trusted individual to make decisions;

(2) Co-Decision Making, where decisions are made jointly with a co-decision-maker; and

(3) Decision-Making Representation, where a representative is appointed by the court to make decisions on behalf of a person who lacks capacity. For hospital patients, this ensures their preferences and rights are respected in medical and personal matters, reducing unnecessary guardianship and enabling a more person-centered approach to healthcare decisions. For more information, please speak to your Medical Social Worker.

MYTH BUSTING/ Q & A

Is everyone entitled to a medical card?

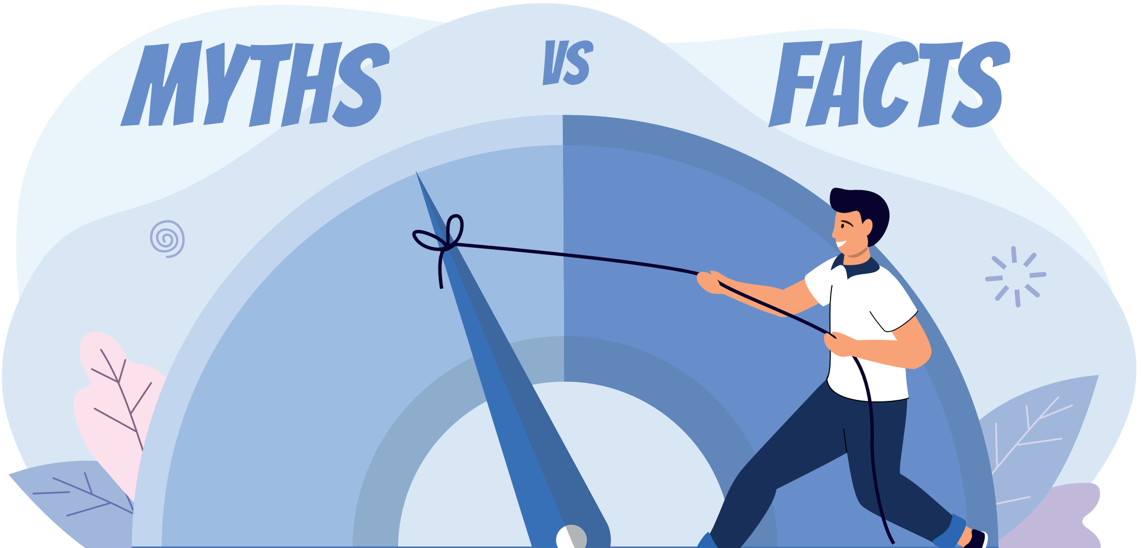
No, not everyone with cancer is automatically entitled to a medical card. While a cancer diagnosis can be a factor in determining eligibility, medical cards are granted based on financial means and, in some cases, medical need. The HSE (Health Service Executive) assesses applications based on income, expenses, and medical circumstances. However, patients with serious illnesses, including cancer, may qualify for a discretionary medical card if their medical costs are deemed significant. Additionally, all cancer patients are entitled to a Drugs Payment Scheme card, which caps monthly prescription costs. If in doubt, patients should apply or speak with a medical social worker for guidance.

It is safe to eat dairy foods?

Yes! Lots of studies have looked for links between dairy foods and an increased risk of cancer. However no study has shown a clear link. The myth that dairy is linked to cancer often comes from concerns surrounding the addition of hormones to milk and meat products. In Europe, the addition of hormones to milk or meat is strictly banned and the sale of meat from countries where the addition of hormones is allowed is also illegal. During your cancer treatment you may be asked to increase your intake of full fat dairy foods as these foods are high in protein and energy.

Does sugar feed Cancer?

Some people have suggested that reducing sugar intake can slow cancer cell growth. However studies have NOT shown this to be true. Cancer cells use sugar (glucose) for energy, but so do all healthy cells in the body. If you cut out sugar in your diet it may result in weight loss and impact your tolerance to treatment.



Should I fast during treatment?

The research into intermittent fasting is in an early phase. Fasting may reduce your ability to meet your nutritional needs and as a consequence lead to weight loss and reduced strength. Therefore, if you are considering intermittent fasting do so only under the advice of your Medical Team/ Dietitian.

Should I take a supplement?

If you are unable to eat a wide variety of foods due to poor intake or loss of appetite you may need to take a vitamin and mineral supplement. Some people believe that taking high doses of certain vitamins will boost the body’s immune system during cancer treatment. However, there is little evidence to support this claim. In fact, some vitamin and mineral compounds can be toxic at high levels, and may affect how radiation therapy, chemotherapy and other medicines work. Supplements (including herbal/ homeopathic remedies) that are not recommended by your medical team may interfere with your treatment or cause worsening of some side effects. Any supplements you wish to take should be checked with your treatment team before commencing.

Truth about alternative diets, such as Ketogenic diet, Alkaline diet, Gerson Therapy, Juicing or Detox diets

There is no evidence that any of these diets are effective in treating or preventing cancer. These diets are restrictive which may contribute to weight loss and result in inadequate intakes of many nutrients including calcium, Vitamin D, Vitamin B12 and protein, and could have a negative impact on your condition and treatment.

IMPORTANT NUMBERS AND CONTACTS

	St Anne's Ward	St Anne's Day Centre	Triage Service	St Anne's Outpatient Suite
Description	Cancer ward where you may be admitted for treatment, procedures or to manage side effects of treatment	Cancer Day Ward where you will have treatment, blood tests or other treatments such as blood transfusions	Dedicated telephone service for patients experiencing side effects from treatments	Consultant led outpatient clinics
Location	6th floor of Nutley Wing	Ground floor of the Nutley Wing		
Contact Numbers	01 221 6682 01 221 6692 01 221 6687 Ward Secretary: 01 221 4222	01 221 4575	If you are not feeling well or experiencing any side effects (Monday-Friday), please contact 087 405 4666 / 01 221 6067 (8am-3.30pm) or 01 221 6094 (3.30pm-6pm) Outside of these times please contact St Anne's Ward	01 221 4894 (10am-12pm and 2pm-4pm)

For Prescription queries please email:

oncologyprescriptions@svhg.ie
haematologyprescriptions@svhg.ie

You must also provide relevant information, including:

- Your Name
- Medical Record Number
- Address
- Name and dose of medication
- Your local Pharmacy contact details

Your medical team can send your prescription to your Pharmacy.

RESOURCES

General Supports

Citizens Information:
www.citizensinformation.ie
Tel: 0818 07 4000

Department of Social Protection:
services.mywelfare.ie

HSE:
www.hse.ie
Tel: 1850 24 1850

Irish Hospice Foundation:
www.hospicefoundation.ie
01 679 3188

MABS (Money Advice and Budgeting Service):
www.mabs.ie
0818 07 2000

Treoir (The National Federation of Services for Unmarried Parents):
www.treoir.ie
01 670 0120

Community Cancer Support Centres

ARC Cancer Support:
www.arccancersupport.ie
01 21 50250

CanTeen Ireland:
www.canteen.ie

Daffodil Centre St Vincent's University Hospital:
01 221 4009
(Located next to the coffee shop on the Ground Floor in the Atrium)

Irish Cancer Society:
www.cancer.ie
1800 20070
Irish Cancer Society have a range of education videos on a variety of cancer related topics

Marie Keating Foundation:
www.mariekeating.ie

Purple House:
www.purplehouse.ie
01 286 6966

Wellbeing

Brain fog and cognitive changes (chemo brain) support
www.macmillan.org.uk

Fatigue:
Irish Cancer Society
www.cancer.ie

Nutrition:
Breakthrough Cancer Research provides evidence-based information, facts and myths, cancer specific recipe booklets, and resources for during and post treatments:
www. breakthroughcancerresearch.ie

HSE nutrition supports has diet related information with recipes

Food Safety Authority Ireland (FSAI) have information about food safety

Activity:
ExWell run classes around the country overseen by a Doctor

Siel Blu offer exercise programmes online and in-person

CancerRehabilitation.ie provides information on local exercise supports

Sexual Wellbeing:
www.hse.ie

NCCP Directory of Community Cancer Support Centres and Services:

https://www.hse.ie/eng/services/list/5/cancer/profinfo/survivorship-programme/nccp-directory-of-community-cancer-support-centres-and-services.pdf

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St Vincent's UCD
Cancer Centre

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