



Humber and North Yorkshire
Cancer Alliance

Cancer
Champion

Cancer Champions Handbook



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Introduction

Thank you for being one of the **Humber and North Yorkshire Cancer Alliance's Cancer Champions**. With your help we can make a really positive difference.

It is proven that the earlier cancer is diagnosed, the better the chances of survival. Encouraging people to go and seek help early from their doctor is how we can easily give them the best chance of receiving good treatment outcomes.

In our region for example, people living in some areas are less likely to spot cancer symptoms and less likely to go for help. That's a real problem as early detection saves lives.

We hope to work together to increase cancer survival rates and improve the lives of the people in our community.

Fact - Cancer will affect one in two of us over the course of our life time. Did you know that some communities have a greater chance of dying from cancer than others?



What is Cancer?

Some facts about cancer

- More than one in two people in the UK will develop cancer in their life-time
- More people are surviving cancer
- Late presentation is a concern as this affects chances of a good outcome

It is estimated that thousands of lives in the UK can be saved every year if efforts to improve diagnosis and early presentation to the GP are increased.

Cancer is the name given to an illness resulting from one of our body's own cells growing out of control. Usually they form a lump of tissue called a tumour.

If the cancer spreads to other parts of the body, it is more difficult to treat.

There are over 200 different types of cancer.

Did you know that nine out of ten people will survive bowel cancer if it is caught early, compared to one out of ten if diagnosed at a late stage?

The role of a Cancer Champion

The role of the Cancer Champion is to raise awareness of cancer symptoms within your own communities and encourage people to see their GP early should they have any symptoms.

The ultimate aim is to help local people recognise symptoms of cancer and go for help when it is required.

How you can help










- Take publicity and information and distribute through family, community and professional networks
- Provide simple signpost information for other people across these networks
- Provide information and insight through personal experience
- Provide a source of motivation through personal experience and help people and their families to overcome any reluctance to act
- By sharing social media posts with your family, community and professional networks

Avoid

- Diagnosing
- Giving advice about treatment
- Making appointments or offering to accompany people to appointments

Knowledge

In this section you will find lots of information that will help you to give people a better understanding of the common risks, symptoms and prevention of cancers.

- Breast cancer** 
- Cervical cancer** 
- Bowel cancer** 
- Prostate cancer** 
- Lung cancer** 
- Ovarian cancer** 
- Head & neck cancers** 
- Skin cancer** 
- Testicular cancer** 

Breast cancer



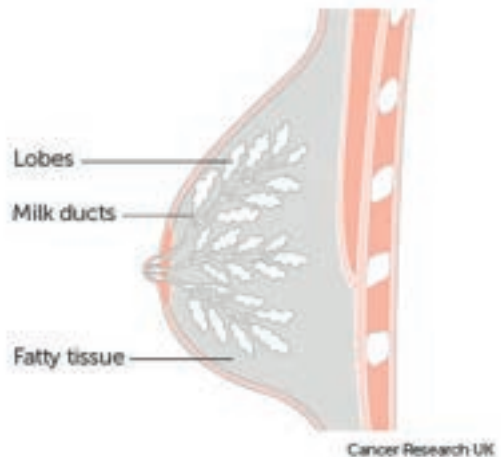
Symptoms

Be breast aware, get to know your own body, know what is normal for you and if you notice any changes, please tell your GP as soon as you spot them.

Things to look out for are:

- Changes in appearance (puckered or dimpled skin)
- Discomfort or pain
- Nipple discharge, rash, red areas that won't heal, or a change in your nipple position (pointing differently or pulled in)

You can develop breast cancer at any time. This includes the time inbetween breast screening appointments. Changes in your breasts may be harmless, but you should get them checked.



Breast screening

Breast checking

- There is no right or wrong way to examine your breasts/chest
- Look and feel for changes, being sure to check into your arm pit and up to your collar bone
- Examine your breasts/chest whilst standing up, looking in a mirror or whilst lying down. Different positions enable people to feel their breasts/chests from different angles and feel different areas of breast tissue

What are the benefits of breast screening?

Regular screening prevents deaths from breast cancer. Screening can find cancer early, before you know it's there. The earlier breast cancer is found, the better your chance of surviving it.

Breast screening uses X-rays (mammograms) to look for breast cancers when they are often too small to be seen or felt.

Breast cancer is the most common cancer in women and it is more likely as you get older.

All women between 50 and 70 years old are invited for breast screening, every three years.

Cervical cancer



Symptoms

Cervical cancer often has no symptoms. You should tell your doctor if you notice any of the following signs:

- Bleeding between periods
- Bleeding during or after sex
- Bleeding after you have been through the menopause
- Any unpleasant vaginal discharge
- Discomfort or pain during sex
- Unexplained pain in your lower back or between your hip bones (pelvis)

These symptoms may be signs of other common conditions. They do not necessarily mean you have cancer.

Key facts

- Cancer of the cervix is a relatively rare type of cancer
- In the UK around 3,224 women are diagnosed each year
- Cervical cancer is the second most common cancer in women aged under 35, after breast cancer



Cervical screening

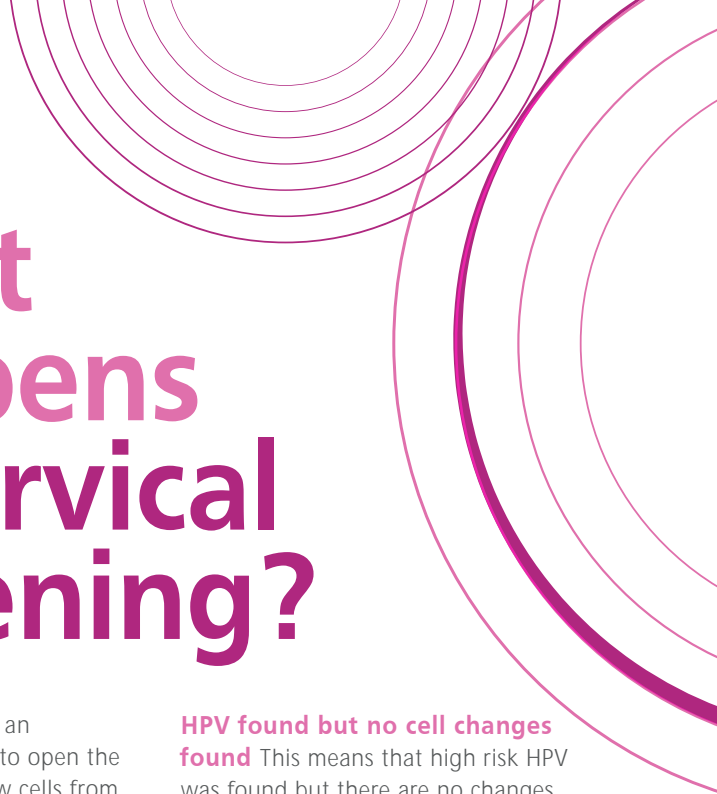
All people with a cervix are eligible for cervical screening.

At present, the National Screening Programme automatically invites all females who are aged 25 to 64 for screening. Those aged 25–49 are invited every three years and those aged 50–64 are invited every five years. Transgender males who still have a cervix but are registered with their GP as a male will not be automatically invited.

Cervical screening (smear test) checks the health of the cervix.

It helps find changes in the cervix before they have a chance to develop into cancer. Treating early changes can prevent cervical cancer from developing. Cervical screening saves the lives of thousands of women every year.

- You can make an appointment for a time to suit, at your GP surgery
- If you want a female member of staff, that's fine
- The test will only take a few minutes
- If you have any concerns about the screening, book an appointment with your cervical screening nurse at your GP surgery. They will be happy to talk through your concerns and make suggestions to make you as comfortable as possible



What happens at cervical screening?

The nurse or doctor uses an instrument (a speculum) to open the vagina and will take a few cells from the surface of your cervix using a special soft brush. These cells will then be sent to a laboratory for testing. Most women have normal results. Sometimes a sample is not clear and you may need to have another test.

Understanding your results

No HPV found This means that you don't have high risk HPV. You will be invited for your next screening in line with your age (three or five years).

HPV found but no cell changes found This means that high risk HPV was found but there are no changes to the cervical cells. You will be invited back for screening in one year. If this happens three times in a row you will be invited for further testing.

HPV and cell changes found This means that you have high risk HPV and cell changes were found in your cervix. You will be invited for more tests and possible treatment.

Inadequate This means the sample was not clear or couldn't be tested properly. You will be asked to return for another cervical screening.



HPV vaccination

A virus called human papilloma virus or HPV is the cause of most changes in the cervix which may lead to cervical cancer.

Most sexually active people will be infected with HPV at some point because it is very common. The types of HPV that cause cervical cancer have no symptoms. A healthy immune system can rid the body of HPV by itself.

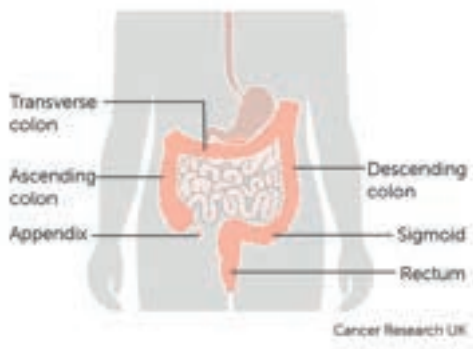
Cervical screening detects the presence of HPV and early cell changes in the cervix. Treating these cells can prevent cancer developing.

A vaccine is being offered to all 12/13 year olds, both male and female, and is also available for those who have missed the vaccination up to the age of 25. By having your vaccination you will reduce your risk of most types of cervical cancer as well as mouth, throat, anal and genital cancers when you are older.

HPV can also cause cancers in the mouth, throat, anus and genitals.



Bowel cancer



Key facts

- It affects both men and women
- In the UK bowel cancer is one of the four most common cancers
- It is sometimes referred to as colon or colorectal cancer
- 90% of people will survive bowel cancer for more than five years if it is caught early enough

Symptoms

If you notice any of these symptoms and they last longer than three weeks tell your doctor.

- A persistent change in bowel habit to looser or more frequent bowel motions
- A sulphuric smell from your bowel movement (Melena)
- Tummy pain, especially severe
- A lump in your tummy
- Bleeding from the bottom without any obvious reason

These symptoms may be caused by other conditions, not just cancer, if you have any concerns, it is best to check with your GP.

Bowel screening

The National Bowel Screening Programme offers screening every two years to all men and women aged between 50 - 74, with the option of requesting a kit over 75.

If you are aged between 50 – 74, the NHS will automatically send you a screening kit through the post. It's designed to be completed in the privacy of your own home, at a time that's convenient for you.

It only takes a few minutes to do and is returned by a prepaid envelope. If you are aged 75+ you can request a screening kit by calling **Freephone number: 0800 707 60 60.**

Bowel cancer screening aims to detect bowel cancer at an early stage (in people with no symptoms), when treatment is more likely to be effective.

It can also find growths in the bowel which are not cancerous but may develop into cancer.



Prostate cancer

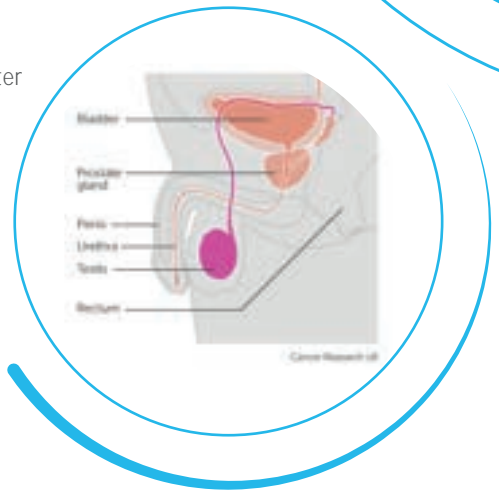
Key facts

- Only men develop prostate cancer.
- Very low risk in men under the age of 50, but risk increasing with age thereafter
- Anyone born with a prostate can develop prostate cancer

Symptoms

The following symptoms may be caused by problems that are much less serious than prostate cancer. Try not to worry if you develop any of them; however do get them checked out by your GP:

- Difficulty or pain in passing urine
- Having to rush to the toilet to pass urine
- Frequent visits to the toilet, especially at night
- Starting and stopping while urinating
- Dribbling urine
- A feeling of not having emptied the bladder fully



Early detection is important

As a man gets older, his prostate may get bigger and restrict the flow of urine. This very common condition is called benign prostatic hyperplasia (BPH). It is not cancer but causes some of the same symptoms as prostate cancer.

Your doctor will ask about your symptoms and may suggest a blood test. This will tell the doctor about the level of protein called PSA (prostate specific antigen) in your bloodstream.

High levels of protein, produced by the prostate, can indicate prostate cancer. However, the test can be positive for other reasons and does not provide a diagnosis of cancer.

The doctor may do a physical examination to see if the prostate is enlarged. A raised PSA level may suggest you have a problem with your prostate, but not necessarily cancer and further tests may be needed.

Further information is available from www.prostate-cancer.org.uk



Lung cancer

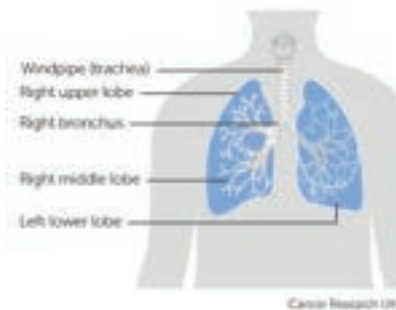
Symptoms

- Having a cough for longer than three weeks for no obvious reason
- A change in a cough you have had for a long time
- Getting out of breath easily
- Coughing up phlegm (sputum) with signs of blood in it
- Chest or shoulder pain when breathing or coughing
- Loss of appetite
- Fatigue
- Losing weight

If you have any of the above symptoms, visit your GP, you may require a chest x-ray. Smokers are more at risk. All of these symptoms may also be caused by other conditions, not just cancer. If you have any concerns, it is best to check with your GP.

Key facts

- Lung cancer has one of the lowest cancer survival rates because over two-thirds of patients are diagnosed at a stage when it's too late
- Although smoking is the main cause of lung cancer (85% of all cases), people who have never smoked can develop lung cancer
- Lung cancer is responsible for more than one in five deaths in the UK





Ovarian cancer



Key facts

- Ovarian cancer is more common in women who have been through the menopause: more than eight in 10 new cases are diagnosed in women aged over 50 years
- 7,400 women are diagnosed with ovarian cancer each year, with only 1,000 of those being younger than 50
- Many women with very early stage ovarian cancer often don't have any symptoms
- Two in three women are diagnosed after the cancer has spread

Symptoms

- Bloating or unusual feeling of fullness in the abdomen
- Pain or discomfort in the abdomen or lower back
- Passing urine more often than usual
- Constipation

These symptoms are usually caused by problems that are much less serious; however they should not be dismissed. If you have any of these symptoms and they don't clear up after several weeks, make sure you see your doctor.



Ovarian cancer

Symptoms after cancer has spread

- Irregular periods or vaginal bleeding after menopause
- Back pain
- Constipation
- Pain during sex
- A swollen abdomen

For more information visit:
www.targetovariancancer.org.uk

If you have two or more close relatives (mother, sister or daughter) who developed ovarian cancer or breast cancer, you may be at higher risk of developing the condition.



Head & neck cancers

There are over 12,000 new diagnoses of head and neck cancers each year.

The treatment you need will depend upon the type of cancer you have.

Head and neck cancers include:

- Nasal and sinus cancer
- Mouth cancer
- Laryngeal cancer
- Oesophageal cancer
- Salivary gland cancer
- Thyroid cancer
- Tonsil cancer
- Nasopharyngeal cancer
- Throat cancer
- Tongue cancer
- Trachea cancer
- Oropharyngeal cancer

Risk factors include:

- Age
- Being overweight or obese
- Smoking or using tobacco
- Excess alcohol
- Very hot drinks
- Human Papillomavirus (HPV)
- Poor diet
- Weakened immune system
- Long term acid reflux



Throat cancer

Oesophageal cancer is also known as cancer of the gullet, food pipe and is part of the digestive system.

Key facts

- It is the 11th most common cancer in adults, with around 8,919 cases being diagnosed each year in the UK
- It is twice as common in men as it is in women and it is also more common in older than younger people
- Almost nine out of 10 cases of Oesophageal cancers can be linked to lifestyle

Symptoms

- Difficulty in swallowing
- Hoarseness or changing voice
- Chronic cough
- Coughing up blood
- Weight loss
- Pain/discomfort in the throat or back
- Regular acid reflux

The symptoms for this cancer include:

- Hoarseness or a change in your voice for more than three weeks
- Difficulty in swallowing food
- Weight loss
- Cough and shortness of breath
- Unexplained lump in the neck





Skin cancer

Key facts

There are two main types of skin cancer:
Melanoma - less common but more serious,
Non-melanoma - common but generally not serious.

Around one in five UK adults will develop non-melanoma skin cancer.

One in 36 males and one in 47 females will develop melanoma which is one of the most common cancers in the 15-34 age group.

The ABCDE screening tool below is used to identify signs of the most common form of melanoma:



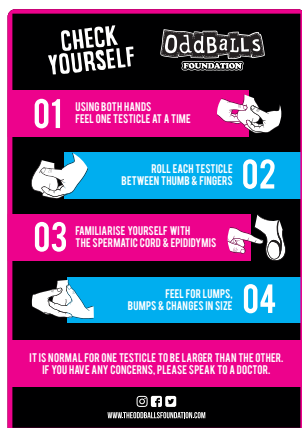
Key advice

Conduct a full body skin examination once a month and visit your GP if you notice anything that looks unusual, is changing in size, shape or colour, or is inflamed, itching, oozing, bleeding or crusting.





Testicular cancer



Key facts

- The most common age for diagnosing testicular cancer is 15-35
- In the UK around 2,200 men are diagnosed with testicular cancer each year. The great news is that 95% of those diagnosed with testicular cancer are alive after a five year period
- Men whose father had testicular cancer are around four times more likely to develop it. Men with a brother who had testicular cancer are around eight times more likely to develop it

Symptoms

- Lump or swelling in one or both testicles
- A feeling of heaviness in the scrotum
- Dull ache in the abdomen or groin
- Pain or discomfort in a testicle or the scrotum

Remember, most testicular lumps are not cancer.

If you have testicles then you are at risk of testicular cancer and should meaningfully self-examine yourself every month.

Overcoming barriers

There are lots of different barriers stopping people visiting their GP. It's important that we challenge these attitudes by getting the key message across **'The earlier cancer is diagnosed, the better'**.

Time

Call your GP surgery if you need an appointment. In some GP surgeries, you may also be able to have a consultation online or over the phone.

If your GP surgery is closed, a recorded message will tell you who to contact. You may be offered an appointment at:

- your GP surgery
- another local GP surgery
- another local NHS service

"I haven't the time to go to see the doctor"

Fear

Lots of people avoid going to their GP. They make excuses and put it off because they might be scared, embarrassed or they may fear the worst and not want to find out.

"I hate going to the doctor"

Worry

Many symptoms that could turn out to be cancer are often minor issues and can easily be dealt with. It is never a waste of time to get peace of mind from contacting your GP.

"I don't want to waste the doctor's time"

Smoking guilt

85% of lung cancer cases relate to smoking in some way. Because of this, lots of smokers think they will be stigmatised for their own illness and can often blame themselves.

“I smoke, so everyone will think it’s my own fault”

Minor symptoms

People put off visiting their GP with minor symptoms, as they assume they will clear up by themselves. In some cases this will happen however, if the minor symptoms persist, then you should contact your GP.

“It’s nothing”

Knowledge

Raising awareness of cancer symptoms, body awareness and early presentation to your GP is vitally important to achieve early diagnosis of cancers.

“I don’t know anything about it”

Traditional attitudes

Delaying visiting your GP could mean that cancer is not diagnosed until a late stage, when the chance of a positive outcome is significantly reduced. Any changes that are persistent, unexplained or unusual for you, should be checked with your GP, regardless of their severity.

“I’ll go to the GP if my symptoms get any worse”



Risk factors

Many people believe that getting cancer is purely down to genes, fate or bad luck. But through scientific research, we know that our risk actually depends on a combination of our genes, our environment and aspects of our lives, many of which we can control. In the UK, one in two people will develop cancer at some point in their lives.

Gender

Whatever gender you are born, will predispose you to a certain level of risk to certain cancers e.g. only females can develop gynaecological cancers and only males are at risk of prostate and testicular cancer. Sometimes risk can be lowered through surgery but this isn't always the case.

Inherited genes, family history

Some people are born with a fault in one of their genes. So people who have had several close relatives who've had cancer may have a higher risk of developing cancer. Only 10% of cancers are attributed to genetics.

Age

Age is the single biggest risk factor for cancer – the older you are, the more likely you are to develop cancer. Nearly two-thirds of all cases of cancer diagnosed in the UK occur in people over 65 years old.

Lifestyle & health

Around four in 10 cancers could be prevented by changes to lifestyle.

There are many things we can do to try to reduce the risk of the disease.

These include:

Avoiding/ giving up smoking and tobacco use



Maintaining a healthy body weight



Eating a healthy balanced diet which is rich in vitamins and minerals



Getting into the habit of using sunscreen regularly



Minimising alcohol consumption



Staying physically active and engaging in regular exercise



Protecting against certain infections such as HPV



Know your audience

Be honest

Your role is to listen, discuss and suggest ways that someone can get help. If you don't know the answer to questions asked, then be honest and signpost them to places where they can get information or advice such as GP, pharmacist or useful contact numbers.

Check they want to talk about it

We approach conversations differently with different people. Knowing your audience and their needs will determine how to approach conversations about cancer.

A good way to start a conversation is to check they're comfortable with the subject.

Techniques

Talking about cancer to people can be awkward, but the conversation does not have to feel difficult. Your role is to encourage, motivate and provide knowledge.

"You seem to have been coughing for a while, do you want to talk about what might be causing it?" could help you get started.

Be an active listener

Getting someone to really open up and talk to you is as much about your attitude and body language as the words you say.

Try to focus on the person and show that you are actively listening by giving back a short summary of what they've said now and again. For example, so you've had that cough for four weeks now.

Ask open questions

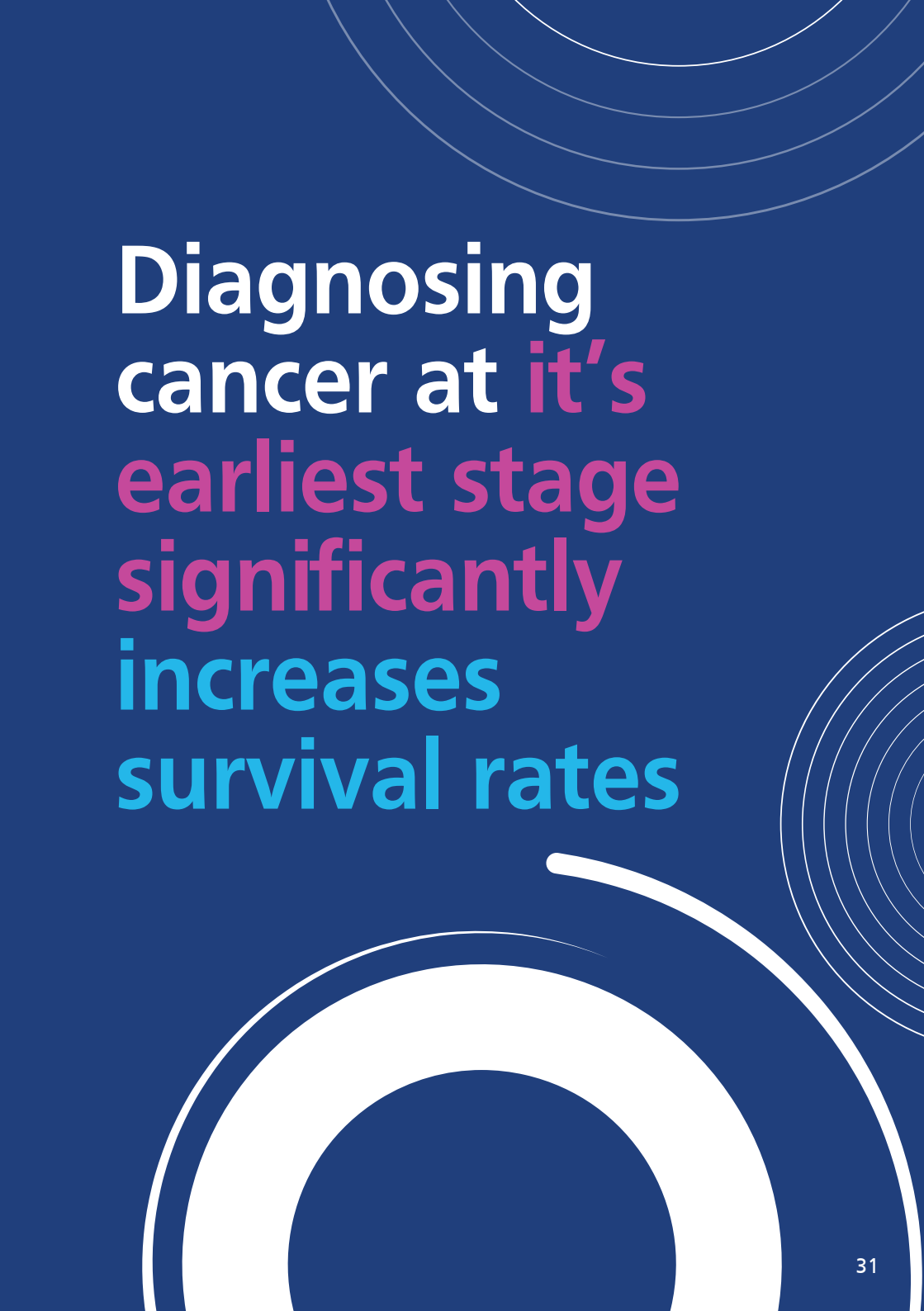
It's easier to get someone talking if your questions don't have simple Yes/No answers. So you could try "how long has that been troubling you?" Rather than, "have you had that problem for long?"

Close the conversation encouragingly

To encourage people to act, it is a good idea to end a conversation with a suggestion of what they could do next, which may be suggesting they make an appointment with their GP.

National contacts

- > NHS www.nhs.uk 111
- > Macmillan www.macmillan.org.uk 0808 808 0000
- > Cancer Research UK www.cancerresearchuk.org
0808 800 4040
- > NHS Screening Programme www.cancerscreening.nhs.uk
- > The National Institute for Health and Care Excellence (NICE)
www.nice.org.uk
- > BBC Health www.bbc.co/health
- > Breast Cancer Now www.breastcancer.org 0808 800 6000
- > Jo's Cervical Cancer Trust www.jostrust.org.uk 0808 802 8000
- > Target Ovarian Cancer www.targetovariancancer.org.uk
020 7923 5475
- > Prostate Cancer UK www.prostatecanceruk.org 0800 074 8383
- > Bowel Cancer UK www.bowelcanceruk.org.uk 020 7940 1760
- > The British Skin Foundation www.britishskinfoundation.org.uk
020 7391 6341
- > Skcin www.skcin.org 0115 981 9116
- > Head and Neck Cancer Foundation www.hncf.org.uk
03301033 724
- > Asthma + Lung UK www.blf.org.uk 0300 222 5800
- > Roy Castle Lung Cancer Foundation www.roycastle.org
0333 323 7200
- > Testicular Cancer UK www.testicularcanceruk.com
- > CoppaFeel! www.coppafeel.org
- > Odd Balls www.theoddballsfoundation.com



Diagnosing
cancer at **it's**
earliest stage
significantly
increases
survival rates



**Humber and North Yorkshire
Cancer Alliance**

Thank you for being a Cancer Champion

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www.hnycanceralliance.org.uk



hny.cancerchampions@nhs.net