

Hong Kong Cancer Fund

Hong Kong Cancer Fund was established in 1987 to provide support, information and care to those living with cancer and to increase awareness and knowledge of cancer in our community.

Our CancerLink Care Centres offer professional support and connect various cancer patient support groups to form an extensive support network for cancer patients and families, offering emotional support and practical assistance to those touched by cancer.

This publication is one in a series of cancer information booklets which discuss different aspects of the disease, including possible treatment, side effects and emotional issues. They are intended to inform the public about available treatment and care. You can also download the information from our website: www.cancer-fund.org.

The free services offered by Hong Kong Cancer Fund are made possible only because of donation from the public. If you would like to show your support and concern for cancer patients, please feel free to contact us. Your generosity will directly benefit cancer patients in Hong Kong. You can also use our donation form at the back of this booklet to make your contribution.

For further information on our services and our work,

Please call our

CancerLink Hotline : 3656 0800

Or visit our website :

www.cancer-fund.org

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Contents

Introduction	3
What is cancer?	4
Chemotherapy explained	6
Why chemotherapy is used?	7
How chemotherapy works?	8
Do I have to go to hospital?	8
How long will I get chemotherapy?	9
How chemotherapy is given?	9
Does it hurt?	11
Chemotherapy is time consuming	12
Is the treatment working?	14
Managing side effects	15
Helping yourself during chemotherapy	15
Side effects	19
Making treatment decisions	35
Deciding on treatment	35
Talking to doctors	35
Talking with others	36
A second opinion	36
Taking part in a clinical trial	37
Follow-up	38
What to ask doctors?	40
Seeking support	42
Emotional support	42
Financial help	43
Relationship and sexual intimacy	43
Caring for someone with cancer	44
Who can help?	46
Hong Kong Cancer Fund Service Network	47
Cancer Patients' Resource Centres	47
CancerLinks	47
Hotline	48
Personal Chemotherapy record	49
Appendix	50
Our Support Network	50
Other Helpful Organisations in Hong Kong	51
Publications by Hong Kong Cancer Fund	52
Donation Form	53



Introduction

This booklet has been prepared to help you understand more about chemotherapy, one of the main types of treatment for cancer.

‘Understanding Chemotherapy’ may help you cope better and assist you to make decisions about treatment.

Chemotherapy can produce different reactions in different people. Some people will have no side effects, others may have a few. Reactions can also vary from one chemotherapy treatment period to the next. However, many side effects can be controlled or reduced.

We cannot advise about the best treatment for you. You need to discuss this with your own doctors. However, we hope this information will answer some of your questions and help you think about the questions you want to ask your doctors.

If you find this booklet helpful, pass it on to your family and friends, who may also find it useful.

The booklet does not need to be read from cover to cover, but can be read in sections according to your needs or interests.



What is Cancer?

Cancer is a disease of the cells, which are the body's basic building blocks. Cancer starts in our genes. Our bodies constantly make new cells: to enable us to grow, to replace worn-out cells, or to heal damaged cells after an injury. Certain genes control this process, helping cells grow and multiply in an orderly way.

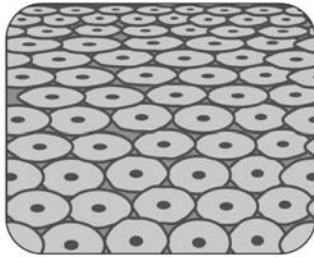
If these genes are damaged, cells can grow abnormally. This is cancer. The cause of cancer is usually unknown. This damage usually happens during our lifetime, although a small number of people inherit a damaged gene from a parent. Damaged genes may grow into a lump called a tumour.

Tumours can be benign (not cancer) or malignant (cancer). Benign tumours do not spread outside their normal boundary to other parts of the body.

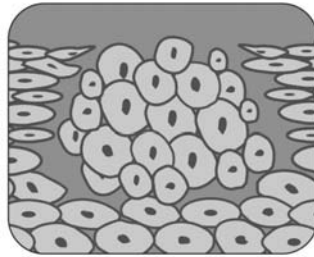
A malignant tumour is made up of cancer cells. When it first develops, this malignant tumour may be confined to its original site. This is known as a cancer in situ (or carcinoma in situ). If these cells are not treated, they may spread beyond their normal boundaries and into surrounding tissues, becoming invasive cancer.

Some benign tumours are pre-cancerous and may progress to

cancer if left untreated. Other benign tumours do not develop into cancer.



Normal cells



Cells forming a tumour

How Cancer Spreads?

For a cancer to grow bigger than the head of a pin, it must grow its own blood vessels. This is called angiogenesis. Sometimes cells move away from the original (primary) cancer, either by the local tissue fluid channels (lymphatics) or in the blood stream, and invade other organs. When these cells reach a new site, they may continue to grow and form another tumour at that site. This is called a secondary cancer or metastasis.



Chemotherapy explained

Chemotherapy is one of the main types of treatment for cancer.

Other treatment options for cancer include: radiotherapy, surgery, immunotherapy and hormone therapy.

Many cancers can be cured or controlled using these treatments, either alone or in combination.

Treatment for cancer depends on the following:

- Type of cancer
- Where it began
- Whether it has spread to other parts of the body
- Age
- General health

When a cure is unlikely, chemotherapy and radiotherapy can relieve symptoms and help you feel as well and comfortable as possible. This is called palliative treatment.

Chemotherapy uses drugs to kill or slow the growth of cancer cells. These are called cytotoxic drugs.

There are many different types of chemotherapy drugs. In most chemotherapy treatments, a number of drugs are given at the same time but sometimes only one drug is used.

Why chemotherapy is used?

■ *To cure cancer*

Some cancers can be cured by chemotherapy on its own or in combination with other treatments such as surgery and radiotherapy.

■ *To control cancer*

If a cure is not possible, chemotherapy may be given to control the cancer. The aim is to make the cancer smaller and stop it from spreading for some time.

■ *To relieve symptoms*

Sometimes it is not possible to completely control cancer. Relieving symptoms such as pain may make life more comfortable.

■ *To help other treatments*

Chemotherapy can be used to assist another treatment, such as surgery or radiotherapy. This is called adjuvant therapy.

Adjuvant chemotherapy can be given either before or after the other treatment. When given before, the drugs can be used to make the cancer smaller thus allowing other treatment more effective. When given after the other treatment, chemotherapy is used to kill those cancer cells that have not been found but may cause problems later.

How chemotherapy works?

Chemotherapy destroys cancer cells by interfering their ability to grow and multiply. Chemotherapy also affects normal cells in multiplying rapidly such as hair cells, cells lining the mouth and blood cells, but these are better able to renew themselves.

Chemotherapy drugs reach cancer cells in most parts of your body via the bloodstream. The rate at which cancer cells are destroyed varies with each type of cancer.

Do I have to go to hospital?

You may have your chemotherapy during visits to the hospital or clinic. Sometimes you may need to stay in hospital overnight or for a couple of days. Some people may be able to have their chemotherapy at home.

Where you get your chemotherapy depends on the drugs you are taking and the way they are given.

Your family and friends can visit you while you are having chemotherapy. The chemotherapy will not harm them. You may be more prone to infection while receiving chemotherapy. Ask your doctor or nurse if family members or friends with a cold or the flu should wait until they are well before visiting.

How long will I get chemotherapy?

Chemotherapy treatment ranges from several months to a year.

The number of chemotherapy treatments, the frequency and the length of time will depend on the type of cancer and the drugs used. Discuss your own treatment with your doctor.

Each chemotherapy treatment period is called a cycle, and each cycle is followed by a rest period. During the rest period, your normal cells will repair themselves and your body will regain its strength.

How chemotherapy is given?

The way you have your chemotherapy will depend on the drugs used and the type of cancer you have.

1. Intravenous chemotherapy in the hospital

Most commonly, chemotherapy drugs are given through a vein (intravenously). This may take only a few minutes, a number of hours or days.

The drugs are injected or dripped into a vein through devices called



tubes or lines, these include:

- cannula - a plastic tube is inserted into a vein in your arm or hand
- central venous access device or central line - a plastic tube is inserted into a vein in your chest. One common type is called a Hickman line. This saves your arm veins from becoming damaged, and avoids the discomfort of regular injections. Blood for testing can also be taken through this line. This type of line can remain in the vein throughout your treatment. Once your treatment is finished, it is easily removed
- peripherally inserted central catheter (PICC) - a tube is put in your arm under local anaesthetic

All lines need to be kept clean to prevent infection or blockage: your nurse will show you how to do this.

Lines cause no pain or discomfort if they are properly placed and cared for, although, you will be aware of it. It is important to report any pain or discomfort from these devices to your doctor or nurse.

2. Intravenous chemotherapy at home

Some people can have their chemotherapy at home with the use of a portable pump. This device is usually inserted into a

line in the chest wall. The pump is programmed to give the prescribed amount of chemotherapy over a specified time period.

The pump can be carried in a bag or a belt holster. The nurses at your hospital can show you how to care for the pump. It is removed after treatment is completed.

3. Other ways of having chemotherapy

Chemotherapy may be given in other ways:

- injection into a muscle
- tablets
- applied onto the skin in a cream
- injected into the fluid around the spine, an artery, the chest cavity, or directly into the tumour or an organ

Does it hurt?

At first, intravenous chemotherapy feels like having blood taken. It should not hurt after the initial injection. If you feel burning, coolness, pain or any other unusual sensation where the line goes into your body, tell your doctor or nurse. Also report any discomfort experienced after treatment.

Many people have little or no trouble having the needle inserted in their hand or lower arm. However, if it becomes difficult to

insert the needle into a vein for each treatment, it may be possible to have a line inserted.



Chemotherapy is time consuming

When you have chemotherapy, you may have to spend a lot of time waiting, usually in hospitals: waiting for the doctor, for blood tests, for the results of blood tests, for your drugs to be made up and for the drugs to be given.

People cope in different ways, depending on how well they feel and what their needs are. Reading a book or a magazine, listening to music or talking to a companion can help pass the time. Others might prefer to focus on what is happening and

write in a journal, thinking or meditating.

At first, it may be frightening in seeing people who are sick from cancer or treatment and you may not wish to identify with them. But another person having chemotherapy can acknowledge your shared experience with just a glance that can help both of you to cope.

It may help to ask how long your waiting time will be. If you wish to be finished by a certain time, tell the receptionist, the doctor or nurse.

Is the treatment working?

After a few cycles of treatment, your doctor will reassess you and may recommend several medical tests and examinations. These tests will show if the cancer has shrunk or disappeared. If the cancer has disappeared, it is great news but it may be several years before it is considered to be cured. This is because sometimes cancer can come back at the same place, or grow in another part of the body.

If chemotherapy is being given as a palliative treatment, the relief of symptoms may tell you if the treatment has worked.



Managing side effects

Chemotherapy affects rapidly multiplying cells. This includes cancer cells and normal cells. The affect on normal cells may cause unwanted side effects.

Side effects vary greatly:

- From person to person - some people will have no side effects, others will experience a few
- According to the type of drugs
- From one treatment period to the next

Side effects usually start during the first few weeks of treatment. Most go away in time. The type and severity of any side effects have nothing to do with the success of the treatment.

Helping yourself during chemotherapy

Many people feel that they have no control over their treatment when they are receiving chemotherapy. However, there are many things you can do to help yourself.

1. Tell your doctor of any side effects

Tell your doctor about any unusual, painful or worrying problems or side effects. He or she can then make sure every-

thing is all right. If you keep quiet, your doctor will not necessarily know anything is wrong.

Consider keeping a diary of any side effects you experience and what you did to cope with them. Share this information with your doctor or nurse.

Contact your doctor urgently if any of these problems occur:

- fever over 38°C or chills
- sweating, especially at night
- easy bruising or any unusual bleeding
- sore throat
- mouth ulcers
- persistent or severe vomiting more than 24 hours after treatment
- severe constipation, diarrhoea or abdominal pain
- burning or stinging on passing urine
- tenderness, redness or swelling around the place where the injection goes in
- any serious unexpected side effects or sudden deterioration in health

2. *Keep active*

Some people find relaxation or meditation helps them feel

better. You will probably find it useful to stay active and exercise regularly if you can. The amount and type of exercise will depend on what you are used to and how well you feel. Discuss with your doctor what is best for you.



Initiatively contact the hospital social worker or nurse to see whether the hospital or local community runs any programs. Your community health centre may also be able to help.

3. Dealing with depression

Treatment and the side effects may cause you to feel depressed. Returning again and again to the hospital or doctor's office that represents the most frightening aspects of cancer, is not easy.



Tips

- ✓ Talking about your feeling or joining a support group may help.

- ✓ Spend time with friends who have a positive attitude. This will help you in reducing negative thinking and focusing on what can be done.
- ✓ Be as active as possible. Plan activities for each day, such as exercise or meeting people.
- ✓ Do things that make you feel good, such as watching funny movies, going for a walk and having a massage.
- ✓ Get up at the same time every morning, regardless of how tired you feel.

If the depression is ongoing, tell your doctor or hospital social worker about it, as medication or counselling may help.

Fear of chemotherapy

It is natural to be worried about side effects but try to stay positive.

You may have heard terrible stories about chemotherapy from your family and friends. Try not to listen to them. Everyone is different and reacts differently.

Chemotherapy drugs are constantly being improved to give you the best possible result and to reduce side effects.

"At first I was more worried about the chemotherapy than my diagnosis but chemotherapy wasn't the trauma I imagined. During my treatment, I led a normal life and found many ways to make the side effects I experienced acceptable."

Side effects

10 Common side effects of chemotherapy

- Feeling tired and lacking energy
- Feeling sick or vomiting
- Constipation or diarrhoea
- Mouth problems
- Hair loss and scalp problems
- Itching skin and other skin problems
- Nerve and muscle effects
- Change in hearing
- Effects on the blood
- Fertility problems

1. *Feeling tired*

Feeling tired and lacking energy (fatigue) is the most common side effect of chemotherapy.

Fatigue can include feeling exhausted, tired, sleepy, drowsy, confused or impatient. You may also have trouble to concentrate and loss of appetite.

Fatigue can appear suddenly and rest may not relieve it. You may continue to feel tired after treatment ends.



Tips

- ✓ Plan your day so you have time to rest.
- ✓ Save your energy. Do not do more than you can comfortably do.
- ✓ Take short naps or breaks.
- ✓ Eat well and drink plenty of fluids.
- ✓ Take short walks or do light exercise.
- ✓ Let other people help you.

If you are not sleeping well, tell your doctor or nurse. They may be able to help. But do not take any pills or medications unless they say you can. Some pills and medications may react badly with your chemotherapy.

2. Feeling sick or vomiting

Not everyone feels sick (nauseous) after chemotherapy. If it does occur, it usually starts a few hours after treatment and may last many hours. If you still feel nauseous after a few days, contact your doctor.

Changes to your diet are to be expected. Sometimes you may not feel hungry. Try to catch up on days when you are hungry. Eat small, frequent meals or snacks if your appetite is poor.

Be willing to change your meals around. If you happen to feel hungrier at breakfast time, have your main meal then and a light meal (such as breakfast cereal) at a time when you feel less like eating. It is important you find a diet that meets your needs.



Tips

- ✓ Eat a light meal before your treatment (for example, soup and dry biscuits) and drink as much fluid as possible.
- ✓ Drink small amounts more often rather than large drinks after treatment. Soda water, dry ginger ale or weak tea are all good choices. Ice cubes, icy-poles or jellies are other ways to increase your fluid intake.
- ✓ Avoid foods that usually upset your stomach.
- ✓ Eat smaller amounts more often.
- ✓ Eat slowly and chew well to help you digest your food better.
- ✓ Eat dry toast or crackers - they often help.
- ✓ Do not do anything too strenuous after a meal; have a lie down for a while.
- ✓ Try breathing deeply through your mouth whenever you feel like being sick.
- ✓ Prepare meals between treatments and freeze them for the days you do not feel like cooking.
- ✓ Try to avoid odours that bother you such as cooking smells, perfume or smoke.
- ✓ Ask your doctor for medication to stop you feeling sick.

Anti-nausea medication can help. If you have intravenous treatment, anti-nausea medication may be added to the drip before and during treatment. If nausea is likely, you will be given anti-nausea tablets to take at home. These are best taken regularly.

Several anti-nausea medications are available. It may take some time before you find the medication that is right for you, but keep trying.

Anti-nausea suppositories are sometimes used to help control nausea or vomiting. These are placed in the back passage (rectum), where they dissolve.

3. Constipation or diarrhoea

Some chemotherapy drugs, pain relief medicines and anti-nausea drugs can affect the lining of the digestive system and cause constipation or diarrhoea.

Let your doctor or nurse know if you experience constipation - your medication may be changed or other medication may be given to relieve the constipation.

At first, diarrhoea can be treated with medication at home. If the diarrhoea is severe, it may cause dehydration and you may need to be admitted to hospital.

If you have diarrhoea, it is important to return to a balanced

diet that includes fresh fruits and vegetables and wholegrain bread and pasta after the diarrhoea has cleared up.

Tips

- ✓ If you have constipation, eat more high-fibre foods, such as wholegrain bread and pasta, bran, fruit and vegetables.
- ✓ If you have diarrhoea, avoid spicy foods, coarse wholegrain products, fatty or fried foods, rich gravies and sauces and raw fruit or vegetables with skins or seeds. Instead, try snacking on clear broth and toast, biscuits and cheese, or cooked rice.
- ✓ Drink plenty of fluids. This will help loosen the bowels if you have constipation and replace the fluids lost through diarrhoea. Warm and hot drinks work well.
- ✓ Get some light exercise. Walking is a good option.
- ✓ Eat small, frequent snacks instead of big meals.

4. Mouth problems

Some chemotherapy drugs can cause mouth sores or infections, particularly in people with head and neck cancer. Ask your doctor or nurse whether you need to take extra care.

Tips

- ✓ Use a soft toothbrush to clean your teeth twice a day. You may be given special mouthwashes to try to prevent mouth infections such as thrush.
- ✓ Rinse ('swill and spit') with a teaspoon of salt in a glass of warm water at least four times a day.
- ✓ Do not use commercial mouthwashes without first asking the doctor. Sometimes they can irritate your mouth.
- ✓ Sip fluids, especially water, and eat moist foods such as casseroles if you have a dry mouth. It may also help to suck on frozen pineapple or chew sugar-free gum.
- ✓ Blend foods.
- ✓ Eat soups and ice-creams.
- ✓ Moisten foods with butter.

If you notice any change in your mouth or throat, such as sores or thickened saliva, or find it difficult to swallow, contact your doctor.

Discuss any dental problems with your doctor. Before you have any dental treatment, tell your dentist you are having chemotherapy.

5. *Hair loss and scalp problems*

Most people having chemotherapy worry about losing their hair. Some drugs may cause hair to thin or fall out but many others do not cause hair loss.

If you do lose some or all of your hair, it will usually grow back when your treatment stops.

When hair loss does occur, it usually starts two to three weeks after the first treatment. Some people lose all their hair very quickly, others lose it after several treatments, while others may only lose a little hair or none at all. Your scalp may feel hot or itchy just before your hair starts to fall out.

Although losing head hair is most common, some people may also lose hair from their arms, legs, chest, pubic region and eyelashes.

If hair loss occurs, you can wear a hat, scarf or wig. The important thing is to do whatever feels comfortable and gives you the most confidence. Cancer Link or medical professionals can help you find a suitable wig.

Tips

- ✓ Keep your hair and scalp very clean.
- ✓ Use a mild shampoo like baby shampoo.

- ✓ Comb or brush your hair gently using a large comb or a hair-brush with soft bristles.
- ✓ Use a cotton, polyester or satin pillowcase--nylon can irritate your scalp.
- ✓ Avoid hair perms and dyes which may increase hair loss.
- ✓ Avoid daily use of hair dryers and rollers and harsh hair care products.
- ✓ Use sunscreen, a hat or scarf to protect your head from the sun.
- ✓ Wear a light cotton turban or beanie to bed, if you are cold at night.
- ✓ If your eyelashes fall out, wear glasses or sunglasses to protect your eyes from the sun and dust when outside.

It takes between four to twelve months to grow back a full head of hair. When your hair first grows back it may be a little different. Sometimes it will be curly even though you have always had straight hair. In time your hair will return to its normal condition and you will be able to continue your usual hair care routine.

Your scalp can be itchy when your hair is growing back. Frequent shampooing can relieve the itching.

Programs to help manage some of the physical effects of chemotherapy include Look Good...Feel Better and the Encore program. Call CancerLink on 3656 0800 to find out more information.

6. Itching skin and other skin problems

You may notice the following changes:

- skin may darken
- peel
- become dry and itchy
- more sensitive to the sun.

Tips

- ✓ Dust corn flour over the itchy parts.
- ✓ Use a lotion or cream to stop the dryness. Ask your doctor for something to help if these suggestions do not work.

7. Nerve and muscle effects

Some drugs can cause tingling and loss of sensation in the fingers and/or toes, and muscle weakness in the legs.

If this happens, tell your doctor or nurse before your next

treatment. A slight change in the treatment is usually all that is needed to stop this happening in the future.

8. *Change in hearing*

Some chemotherapy drugs can cause loss of the ability to hear high-pitched sounds. They can also cause a continuous noise in the ears known as tinnitus. Let your doctor know if you notice any change in your hearing.

9. *Effects on the blood*

The soft and spongy material inside bones (the bone marrow) makes three types of blood cells:

- white blood cells: fight infection
- red blood cells: carry oxygen to cells throughout the body
- platelets: help blood to clot and stop bleeding.

The bone marrow's job is to maintain normal levels of blood cells (the blood count) to keep you fit and healthy.

Some chemotherapy drugs can occasionally affect the bone marrow so that your blood count is reduced. The count may fall with each treatment. Blood tests will be done regularly to make sure your blood cells return to normal before your next treatment.

Occasionally, a low blood count will cause some problems. These are related to the type of blood cell affected.

(1) Infection

During chemotherapy, colds and flu may be harder to shake off and scratches and cuts may get infected easily. See your doctor if you are unwell: do not wait out a cold when you are having chemotherapy. Sometimes doctors recommend taking antibiotics as a precaution against infection. If you are having chemotherapy in winter, check with your doctor about having a flu injection.

Granulocyte-colony stimulating factor (G-CSF) is a treatment given by injection to some people after chemotherapy. It helps to increase the number and function of a type of white blood cell called neutrophils, which help protect against infection. G-CSF is not prescribed for everyone after chemotherapy; you may wish to check with your doctor if it is an option for you.

(2) Bleeding problems

A fall in the number of platelets can cause you to bleed for longer than normal after minor cuts or scrapes, or to bruise more easily.

Tips

- ✓ Take care not to cut yourself when shaving or using nail scissors.
- ✓ If you bleed, apply pressure for about 10 minutes.

(3) Anaemia

If the red blood cells are low, anaemia can occur. This can make you feel weak, tired and look pale.

Tips

- ✓ Avoid people with coughs, colds and other infections. Naturally this is not practical with people you are living with, so just use your common sense.
- ✓ Let your doctor know if you are in contact with a person who has chickenpox. You may need an injection to prevent chickenpox or shingles.
- ✓ Be careful not to cut or nick yourself when using scissors, needles, knives or razors. Small cuts can harbour germs and can be a good place for an infection to start.
- ✓ Wash your hands with soap after using the toilet and before eating to avoid spreading germs.

10. Fertility problems

Chemotherapy may affect sexual organs and functioning in both women and men. This may have a temporary or permanent effect on your ability to have children (fertility). It is best for you and your partner to talk about these issues with your doctor.

a. For women

Some women's periods become irregular during chemotherapy but return to normal after treatment. For other women, chemotherapy may cause periods to stop completely (menopause). After menopause, women can not have children. The signs of menopause include hot flushes, sweating, particularly at night, and dry skin. Talk to your doctor about medication for relieving the symptoms of menopause. Early menopause (before age 40) may cause bones to become weaker and break more easily. This is called osteoporosis.

b. For men

Chemotherapy drugs may lower the number of sperm produced and reduce their ability to move. This can cause infertility, which may be temporary or permanent.

The ability to get and keep an erection may also be affected

but this is normally temporary.

Women may be able to store eggs (ova) and men may have sperm stored before treatment starts for use at a later date. Ask your doctor about this.

c. Contraception

Although chemotherapy reduces fertility, it is possible for some women to become pregnant while having chemotherapy and a man having chemotherapy could still make his partner pregnant.

Pregnancy should be avoided during chemotherapy in case the drugs harm the unborn baby. Birth control (contraception) must be used. Ask your doctor about your contraceptive options.

The pill may be prescribed to some young women as a contraceptive and to help protect the ovaries from the effects of chemotherapy.

Should you or your partner become pregnant, talk to your doctor urgently.

Tips

- ✓ Use birth control.
- ✓ Use a condom during sexual intercourse for the first 48 hours after chemotherapy because some of the drugs may end up in the sperm.

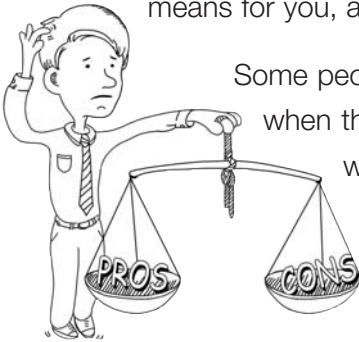


Making treatment decisions

Deciding on treatment

Sometimes it is difficult to decide on the right treatment. You may feel everything is happening so fast, you do not have time to think things through. There is always time for you to consider what sort of treatment you want.

You have the right to find out what a suggested treatment means for you, and the right to accept or refuse it.



Some people will always choose to be treated, even when there is only a small chance of cure. Others want to make sure the benefits of treatment outweigh any side effects, and others will choose the option that offers the best quality of life.

Talking to doctors

You may want to see your doctor a few times before deciding on treatment. When your doctor first tells you that you have cancer, it is obviously very stressful and you may not remember very much.

- You may need to ask the same questions more than once.
- Before you see the doctor, it may help to write down your questions.
- Take notes during the session or tape-record the discussion with the doctor's permission.
- Take a family member or friend with you; he or she can take part in the discussion, take notes or simply listen.

Talking with others

Once you have discussed treatment options with your doctor, you may want to talk them over with your family or friends, nursing staff, the hospital social worker or chaplain, your own religious or spiritual adviser, or the Cancer Link. Talking it over can help sort out the right course of action for you.



A second opinion

You may want to ask for a second opinion from another specialist. This is understandable and can be a valuable part of your decision-making process. Your specialist or doctor can

refer you to another specialist and you can ask for your results to be sent to the second-opinion doctor.

You can ask for a second opinion even if you have already started treatment or still want to be treated by your first doctor.

Taking part in a clinical trial

Your doctor may suggest to you in considering the taking part in a clinical trial. Clinical trials are a vital part of the search to find better cancer treatments.

The aim for doctors to conduct clinical trials are to test for new or modified treatments and see if they are better than existing treatments. Many people all over the world have taken part in clinical trials that have resulted in improvements to cancer treatment.

If your doctor asks you to join a clinical trial, make sure you understand the reasons for the trial and what it means for you.

You may wish to ask your doctor:

- What treatments are being tested and why?
- What tests are involved?
- What are the possible risks or side effects?
- How long will the trial last?

- Will I need to go into hospital for treatment?
- What will I do if any problems occur while I am in the trial?
- Who is paying for the trial?
- Will all the extra costs of being in the trial be covered?

If you decide to join a randomised clinical trial, you will be given the best existing treatment or a promising new treatment. You will be chosen at random to receive one treatment or the other.

If you do join a clinical trial, you have the right to withdraw at any time. Doing so will not jeopardise your treatment for cancer.

It is always your decision to take part in a clinical trial. If you do not want to take part, your doctor will discuss the best current treatment choices with you.

Follow-up

No matter what type of cancer or treatment you have had, you will need regular checkups. Your doctor will want to see you when you finish your treatment.



After this, some people will be referred back to their original doctor or to another doctor experienced in cancer treatment, and some will continue to see the medical oncologist for follow-up visits.

If you are concerned about any unexpected symptoms, contact your doctor straight away. You do not need to wait until your next appointment.

"It is a big empty space when I finish chemotherapy. I felt like I have lost my life line. I was fearful the cancer would come back."

What to ask doctors?

You may find this suggested checklist helpful when thinking about the questions to ask your doctor. If there are answers you do not understand, it is all right to ask your doctor to explain again.



Some suggested questions are listed below:

1. When the treatment will start? How long will the treatment take?

2. Will I have to stay in hospital, or will I be treated as an out-patient?
3. How will I feel? Will it be painful?
4. How much will it affect what I can do?
5. What are the short term and long term side effects of my treatment?
6. How should I take care of myself during treatment?
7. Can I lead a normal life after the treatment?
8. Do I need to pay special attention to my diet?
9. How do I know whether the chemotherapy is working or not?
10. How much will it cost?

Seeking support

Emotional support

It will help to talk about your feelings with your partner, family members or friends, or a hospital counsellor, social worker, psychologist or your religious or spiritual adviser.

Sometimes you may find that your family and friends do not know what to say to you. You may feel able to approach them directly and tell them what you need. You may prefer to ask a close family member or a friend to talk with other people for you. Some people may feel so uncomfortable that they avoid you. They may expect you to 'lead the way' and tell them what you need. This can be difficult to handle and can make you feel lonely.



Financial help

Cancer is serious illness. Many cancer patients will need to face not only side effects of the treatments and emotional trauma, but also financial difficulties. The disease can become a tremendous burden.

Apart from using the public health care services, the medical insurance and welfare provided by employers as well as Government hardship funds for the less well-off are all useful to cut down your medical expenses.

You may approach the medical social workers or Cancer Patient Resource Centres in major hospitals for institutions that might be able to provide assistance. The 'Comprehensive Social Security Assistance' (CSSA) offered by the Social Welfare Department (SWD) may also be helpful in solving your financial difficulties. For details please Call SWD hotline at 2343 2255.

Contact the medical social worker in your hospital or call our Hotline 3656 0800 for more information.

Relationships and sexual intimacy

We are all sexual beings and intimacy adds to the quality of our lives. Cancer treatment and the emotional effects of cancer may affect you and your partner in different ways. Some peo-

ple may feel an increased need for sexual and intimate contact for reassurance. Other people may be less interested in intimacy and sex, or feel that these things are temporarily less important.

Chemotherapy may make you feel too tired or sick to want sex. Some people may also feel that they are less sexually attractive to their partner, because of changes that cancer and its treatment have caused to their body.

Talk about your feelings with your partner. Try different positions and practices to find out what feels right for both of you.

Although you may not feel like sexual intercourse, there are many other ways in which you and your partner can maintain closeness. Touching, cuddling, kissing and stroking can all be pleasurable and comforting and, as you begin to feel better, you can gradually resume your usual lovemaking.

Caring for someone with cancer

Looking after someone with cancer can be very stressful, particularly when it is someone you care about. Remember to look after yourself during this time. Give yourself some time out, and share your worries and concerns with others.

You may have to make many decisions. You will probably have to attend many appointments with doctors, support services

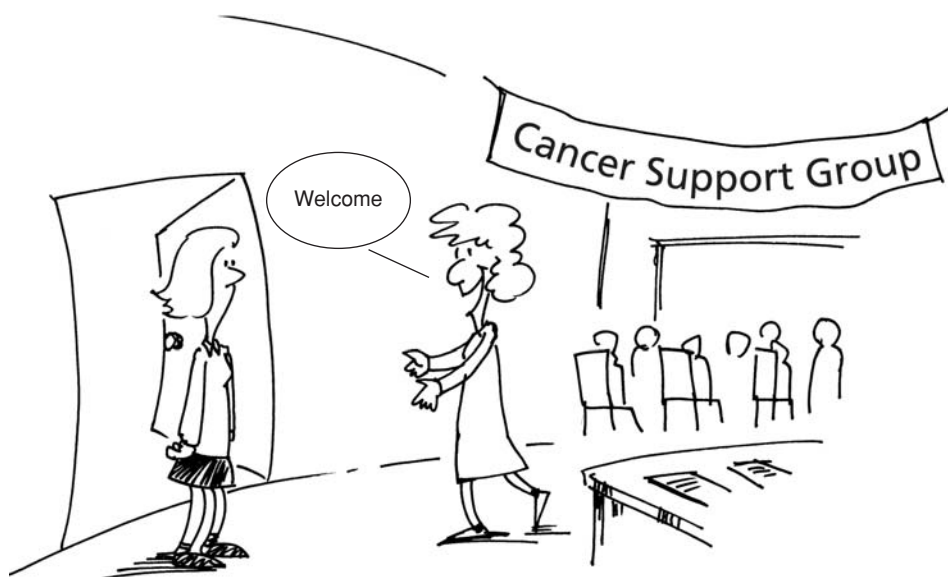
and hospitals as many people with cancer have found it helpful to take a family member or close friend with them.

Cancer support group is generally open to patients and carers. A support group can offer the chance to share experiences and ways of coping for all the family. No one has to cope alone.

To get more information, please contact ***CancerLink 3656 0800***.

Who can help?

The most important thing to remember is that there are people available to help you and your family. Often it is easier to talk to someone who is not directly involved with your illness. You may find it helpful to talk to a counsellor who is specially trained to offer support and advice. Many people also find great comfort in their religion at this time. Hong Kong Cancer Fund is always willing to discuss any problems that you might have and we can put you in touch with a counsellor or a support group.



Hong Kong Cancer Fund Service Network

Our six “Cancer Patients’ Resource Centres” in major public hospitals and the two CancerLinks Support Centres in the community provide free counselling, support and information to those in need. Together they form a seamless service network that meet the needs of those living with cancer at different stages of their cancer journey. For directory, please see page 50.

■ *Cancer Patients’ Resource Centres*

There are altogether six Cancer Patients’ Resource Centres within the oncology departments of the major public hospitals. They are often the first point of contact for support and information after a diagnosis. The centres provide cancer information, emotional support, counselling and guidance to those in need.

■ *CancerLinks*

We have two care centres outside the hospital setting which cater to the specific needs of cancer patients throughout different stages of their diagnosis. CancerLink Central offers a well designed holistic rehabilitation programme which emphasizes individual needs while CancerLink Wong Tai Sin is the home to 14 support groups and is the centre for peer sharing and group activities.

Care specialists including registered social workers, oncology nurses, counsellors and therapists are on board to provide support, information and specialised services.

Programmes in our care centres are carefully designed to meet different needs. Private and group counselling are conducted by registered professionals to help patients and families deal with different emotional aspects during their course of treatment. There are also courses to develop coping skills, relaxation classes to help relieve mental and physical stress, and peer support groups for experience sharing. There is also a well-stocked library in each centre, with rehabilitation equipment ready for use or loan.

Whether you are seeking self-help information or group support, choices are always available.

■ **Hotline**

Our hotline receives thousands of calls every year. It is supervised by professionals who share and give advice on both physical and emotional difficulties faced by patients and their families. Talking with someone who understands can make a huge difference.

Hotline : 3656 0800





Your personal Chemotherapy record

Your doctor or nurse can help you to complete this record.

What drugs am I receiving?

How often will I receive this treatment?

What are the possible side effects of treatment?

Contact names

Telephone



Appendix

Hong Kong Cancer Fund Support Network

CancerLink Care Centres

CancerLink Central

Unit 3, G/F., The Center, 99 Queen's Road Central, Hong Kong
Tel: 3667 3000 Fax: 3667 3100 Email: canlinkcentral@hkcf.org

CancerLink Wong Tai Sin

Unit 2-8, G/F., Wing C, Lung Cheong House, Lower Wong Tai Sin Estate, Kowloon
Hotline: 3656 0800 Tel: 3656 0700 Fax: 3656 0900 Email: canlink@hkcf.org

CanSurvive (English-speaking Support Group)

Tel: 2868 0780 Hotline: 2328 2202 Fax: 2524 9023

Pamela Youde Nethersole Eastern Hospital

Cancer Patients' Resource Centre

Level L1, Radiotherapy & Oncology Department, 3 Lok Man Road, Chai Wan, Hong Kong
Tel: 2595 4165 Fax: 2557 1005

Queen Mary Hospital

Cancer Centre

2/F., Professorial Block, 102 Pokfulam Road, Hong Kong
Tel: 2855 3725 Fax: 2855 3901

Prince of Wales Hospital

Cancer Patients' Resource Centre

3/F., Sir Yue Kong Pao Cancer Centre, 30-32 Ngan Shing Street, Shatin, NT
Tel: 2632 4030 Fax: 2636 4752

Queen Elizabeth Hospital

Cancer Patients' Resource Centre

Room 601, Block R, 30 Gascoigne Road, Kowloon
Tel: 2958 5393 Fax: 2332 458

Tuen Mun Hospital

Cancer Patients' Resource Centre

Tsing Chung Koon Road, Tuen Mun, NT
Tel: 2468 5045 Fax: 2455 7449

Princess Margaret Hospital

Cancer Patients' Resource Centre

2/F. & 3/F., Block H, 2-10 Princess Margaret Hospital Road, Lai Chi Kok, Kowloon

Kwong Wah Hospital

The Breast Centre

Department of Surgery
1/F., South Wing, 25 Waterloo Road, Kowloon
Tel/Fax: 3517 5240

Other Helpful Organizations in Hong Kong

Social Welfare Department

Hotline: 2343 2255

Rehabaid Centre

Tel: 2364 2345 Fax: 2764 5038

The Samaritans

(24-hour Multi-Lingual Suicide Prevention Hotline)

Tel: 2896 0000 (English) 2382 0000 (Chinese)

Domestic Helpers

(via The HK Council of Social Service)

Tel: 2864 2857 Fax: 2865 4916

The Chain of Charity Movement

Community Support & Escorting Service

(can arrange visits, transportation to hospitals and shopping etc.)

Tel: 2560 6299 Fax: 2777 2269

Government Ambulance Service

Tel: 2735 3355

Easy Access Bus

(can arrange visits, transportation to & from hospitals / clinics for those 60 or above with movement difficulties)

Tel: 2348 0608

St. John Ambulance (24-hour service)

Tel: 2576 6555 (Hong Kong) 2713 5555 (Kowloon)

The Jessie and Thomas Tam Centre

(to provide bereavement counselling service)

Tel: 2725 7693 Fax: 2304 2277

Comfort Care Concern Group

(to provide bereavement counselling for terminally-ill patients and their families)

Tel: 2361 6606 Fax: 2361 6294

Society for the Promotion of Hospice Care

(Provide bereavement counselling service)

Tel: 2868 1211 Fax: 2530 3290

Website: www.hospicecare.org.hk

Publications by Hong Kong Cancer Fund

UNDERSTANDING SERIES

No. Title

- 01 Bladder Cancer
- 02 Bowel Cancer
- 03 Brain Tumor
- 04 Breast Cancer
- 05 Cervical Cancer
- 06 Chemotherapy
- 07 Hodgkin's Disease
- 08 Hysterectomy
- 09 Larynx Cancer
- 10 Liver Cancer
- 11 Lung Cancer
- 12 Lymphoedema
- 13 Mouth & Throat Cancer
- 14 Nasopharyngeal Carinoma
- 15 Non-Hodgkin's Lymphomas
- 16 Oesophagus Cancer
- 17 Prostate Cancer
- 18 Radiotherapy
- 19 Stomach Cancer
- 20 Thyroid Cancer
- 21 Uterus Cancer

HOW TO COPE SERIES

No. Title

- 01 Breast Care after Surgery
- 02 Cancer and Complementary Therapies
- 03 Coping at Home: Caring for someone with advanced cancer
- 04 Coping with Cancer
- 05 Diet and Cancer
- 06 Hair Loss
- 07 Pain and other Symptoms of Cancer
- 08 Sexuality and Cancer
- 09 Talking to Someone with Cancer
- 10 What Do I Tell the Children
- 11 When Cancer Comes Back
- 12 When Someone In Your Family Has Cancer

Please call 3667 3000 to request your free English booklet.

I would like to help

I want to support the production of the cancer booklets by giving a **monthly donation** of

HK \$500 HK \$300 HK \$200 HK \$100

HK \$ _____

I want to give a one-off donation of :

HK \$2,000 HK \$1,000 HK \$500 HK \$300

HK \$ _____

Personal Information

(Mr / Mrs / Ms) Name: _____

Address: _____

_____ Daytime Tel. No.: _____

E-mail: _____ Fax No.: _____

Donation methods

Autopay (we will forward the autopay form to you)

Cheque (please make payable to **The Hong Kong Cancer Fund**)

Credit Card (please fax to 2524 9023)

Amex (service charge waived) Visa Mastercard JCB Diner's Club

Cardholder's Name: _____

Card No.: _____

Card Issuing Bank: _____ Expiry Date (valid for two months): _____

Card Holder's Signature: _____



268

For Office Use Only

Authorisation Code: _____ Date: _____

Please complete the form in BLOCK LETTERS and return to us by post to The Hong Kong Cancer Fund, Room 2501, Kinwick Centre, 32 Hollywood Road, Central, Hong Kong, or fax the form to 2524 9023.

All donations of HK\$100 or above are tax deductible. All information collected will be treated with strict confidence and for internal use only.