

A practical guide to living with and after cancer

MANAGING BREATHLESSNESS

Includes a relaxation CD for people
with breathlessness



About this booklet

If you have breathlessness due to cancer or its treatment, this booklet is for you.

It has information about different ways of managing your breathlessness more effectively. This includes breathing techniques, coping with anxiety, relaxation techniques, treatments and practical tips for everyday life.

This booklet should ideally be read alongside our information about the type of cancer you have and your treatment – visit **[be.macmillan.org.uk](https://www.be.macmillan.org.uk)** or call **0808 808 00 00** to order more resources for free.

Breathlessness can be distressing, and it can affect several areas of your life. However there are many things that can relieve or help you manage breathlessness, to make living with it easier. Learning how to have some control over difficult symptoms can reduce their impact. You will need to practise these different techniques, but they can make a difference to the way you live.

In this booklet, we've included comments from people who have been affected by breathlessness, which we hope you find helpful. Some have been sourced from the website **[healthtalkonline.org](https://www.healthtalkonline.org)** and some are from our online community. Some names have been changed.



On the inside back cover of this booklet you'll find a copy of our relaxation CD **Relax and breathe**. It will help you learn ways to manage your breathlessness.

We've also listed the details of other useful organisations on pages 55–61, and included two pages where you can write down any notes or questions for your doctor, nurse or other healthcare professional (see pages 62–63).

We can't give you advice about the best treatment for you. This information can only come from your doctor, who knows your full medical history.

If you'd like to discuss this information, call the Macmillan Support Line free on **0808 808 00 00**, Monday–Friday, 9am–8pm. If you're hard of hearing you can use textphone **0808 808 0121**, or Text Relay. For non-English speakers, interpreters are available. Alternatively, visit **macmillan.org.uk**

If you find this booklet helpful, you could pass it on to your family and friends. They may also want information to help them support you.

Contents

The lungs and breathlessness

5

Coping with breathlessness

15

Managing everyday life

31

Further information

49



THE LUNGS AND BREATHLESSNESS

The lungs	6
Causes of breathlessness	8
Indicating how breathless you are	12

The lungs

We have two lungs – one on each side of the chest. When we breathe in, air passes from our nose or mouth down through a tube called the windpipe (trachea). The windpipe divides into two tubes (airways), one going to each lung. These tubes are known as the right and left bronchus. They divide to form smaller tubes called bronchioles, which carry air through the lungs.

At the end of the bronchioles are millions of tiny air sacs called alveoli. In the alveoli, oxygen is absorbed from the air we breathe in. This oxygen passes into the bloodstream to be circulated around the body.

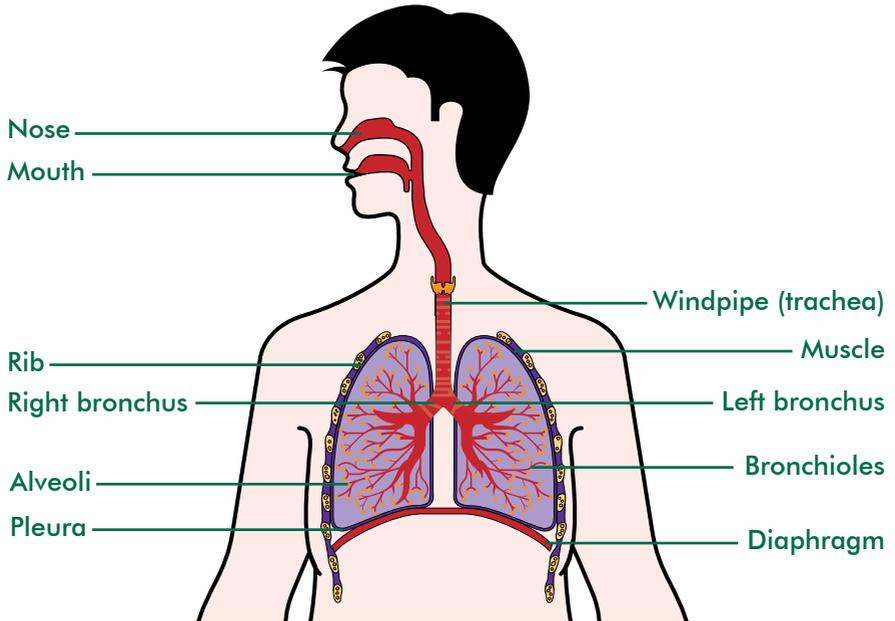
Carbon dioxide is a waste gas that needs to be removed from the body. It passes from the bloodstream into the alveoli and is then breathed out by the lungs.

Just below the lungs is a sheet of muscle called the diaphragm. The diaphragm and the muscles between the ribs contract and relax in order to suck air into and push air out of the lungs. They are the main muscles used for breathing when you're relaxed.

During heavy exercise, the muscles in your shoulders and upper chest can also help with breathing. These muscles are not designed to work for long periods of time and get tired easily.

The lungs are covered by a lining (membrane) called the pleura, which has an inner and outer layer. The inner layer covers the lungs. The outer layer lines the ribcage and the diaphragm. The pleura produces a fluid that acts as a lubricant, which allows the lungs to move in and out smoothly.

Upper airways and the lungs



Causes of breathlessness

There are different causes of breathlessness. Your doctor should be able to tell you the cause of your breathlessness so that you can get the most helpful treatment. If your breathlessness gets worse quickly or you have pain when you breathe, contact your doctor immediately as you may need urgent treatment.

Cancer affecting the lungs

This can be:

- primary lung cancer (cancer that started in the lungs)
- a secondary cancer that has spread to the lungs from another part of the body.

Treatments such as radiotherapy or chemotherapy may help shrink the tumour and relieve breathlessness caused by the cancer. We have information about the type of cancer you have and its treatments.

A build-up of fluid in the lining of the lungs (pleural effusion) or abdomen (ascites)

If cancer cells irritate the lining of the lungs or stomach, this can cause a build-up of fluid. This means there is less room for the lungs to expand. Pleural effusion and ascites can be treated by draining the fluid. We have more information about these conditions.

Low levels of red blood cells in the blood (anaemia)

This can be due to the cancer or its treatment, such as chemotherapy or radiotherapy. Red blood cells carry oxygen around the body. If the level of red blood cells in your blood is low, you may become very tired and breathless.

Your doctors may recommend that you have a blood transfusion. We can send you more information about this.

Chest infections

These cause phlegm in the airways and can make you feel breathless. Drinking a good amount of fluid will make the phlegm easier to move so you can cough it up more easily. If you develop a high temperature (above 38°C or 100.4°F), a chesty cough or pain when you breathe, contact your doctor immediately as you may need antibiotics.

Weakened muscles

In advanced cancer, the muscles that help breathing can become weak because of fatigue, lack of nutrition, weight loss and reduced physical activity. This can make breathing more difficult.

Pain

Pain can make it difficult to breathe and move comfortably. Tell your doctor about any pain you're experiencing so they can make sure it's being managed effectively.

A blood clot in the lung (pulmonary embolism)

This can cause sudden breathlessness and pain when you breathe. If you have these symptoms, contact your doctor immediately.

Other conditions

Some other conditions can cause breathlessness, such as congestive heart failure, asthma, chronic obstructive pulmonary disease (COPD) and pulmonary oedema (a build-up of fluid in the air sacs (alveoli) in the lungs). Your doctor can advise you about the treatment you need.

Smoking tobacco

Smoking makes breathlessness worse. The smoke causes irritation and inflammation of the airways. This means less oxygen is absorbed into the bloodstream. If you want to stop smoking, ask your nurse or doctor about help that's available locally, such as free local NHS Stop Smoking Services (see pages 56–57). Our booklet **Giving up smoking** may also help.

Anxiety and panic

Feelings of anxiety and panic are common. They are natural reactions after a cancer diagnosis and during treatment. They can cause some people to have rapid and shallow breathing. Becoming breathless can itself cause more anxiety and panic (see page 16).

Cancer treatments

Surgery for lung cancer may involve removing part, or all, of a lung. Many people are able to breathe well once they recover from surgery, but some people do have breathing problems.

Radiotherapy to the chest can cause inflammation of the lung (pneumonitis), which can lead to breathlessness. This is usually a short-term problem, but for some people it can be a long-term problem. People who have intensive radiotherapy to the chest can sometimes develop hardening and thickening (scarring) of the lung, which can cause long-term breathlessness.

Some **chemotherapy drugs**, such as bleomycin, cyclophosphamide or methotrexate, can sometimes cause breathing problems.

i Your cancer specialist can tell you about any effects your treatment may have on your breathing, and answer any questions you have.

If you experience breathlessness, always let your doctor know.

Indicating how breathless you are

Using a Borg scale

When you become breathless, it may help to give your family, friends and healthcare professionals a clear idea of how bad the breathlessness is. You can use the score when phoning your health professional - this can help them to understand how much support you need at the time. We've added a Borg scale opposite and at the back of this booklet to help you do this (see page 68).

A Borg scale can be used to give your breathlessness a number;

- 0 being no breathlessness at all
- 10 being the most severe breathlessness.

A Borg scale can also help you to be aware of your breathing and how it changes, especially when carrying out activities.

You might want to point to the scale during episodes of breathlessness, to communicate to others how you're feeling when you don't want to use your breath to talk.

Borg scale

0	Nothing at all
0.5	Very, very slight (just noticeable)
1	Very slight
2	Slight (light)
3	Moderate
4	Somewhat severe
5	Severe (heavy)
6	↓
7	Very severe
8	↓
9	↓
10	Very, very severe

Borg, G. Psychophysical bases of perceived exertion. *Medicine and Science in Sports and Exercise*. 1982. 14:377. Lippincott Williams & Wilkins.



COPING WITH BREATHLESSNESS

Coping with anxiety	16
Relaxation	17
Breathing techniques	20
Using a handheld fan	26
Medicines for breathlessness	27

Coping with anxiety

Being breathless may sometimes cause you to feel anxious. Some people feel as though they are having a panic attack.

Common symptoms of anxiety and panic are:

- heart palpitations
- feeling sick
- sweating
- a dry mouth
- dizziness.

Anxiety may cause you to breathe too fast and to take shallow breaths from the top of your lungs rather than your lower chest. This can make you feel more breathless, which in turn can increase the anxiety.

A way to break this cycle of anxiety is to gradually slow your breathing rate, and use controlled breathing exercises (see pages 24–25) or relaxation techniques (see pages 17–18). The CD in the back of this booklet might also help. Using a handheld fan to blow air onto your face, and breathing out against the fan, may also help calm your breathing – see page 26.

Some people may need to take medication to help them manage their anxiety – see page 27.

If you notice there are times when you hyperventilate (overbreathe), try to identify what triggered it. Talking about the cause with family or friends may help, because then they will be aware of it next time.

Relaxation

Breathlessness can make you feel anxious and panicky (see page 16). These feelings can cause rapid, shallow breathing, which in turn can make you more breathless.

Learning and practising a relaxation technique can help you control anxiety and breathe more easily.

Try to find a quiet and peaceful place to do this exercise. Make sure you're comfortable, whether you're sitting or lying down, with your shoulders, neck and back well-supported. Have your arms by your sides or hands resting on your lap. This technique can take practise, so try it for 5 to 10 minutes once a day to start off with, and then try to do more. Set aside time during the day to practise. It might be helpful for someone to read these instructions to you.

1. Close your eyes.
2. Begin by breathing out and then in, just as much as you need. Then breathe out slowly with a slight sigh, like a balloon slowly deflating.

Do this once more, as slowly as you can, and as you breathe out feel any tension in your body begin to drain away. Then try to keep your breathing at an even, steady pace.

Once you feel comfortable doing this, you can move on to the next stage (see page 18).

3. Begin to think of each part of your body in turn.
4. Start with your toes and check they are relaxed and comfortable. Allow them to feel heavy, and free of any tension.
5. Now think about your legs and allow your thighs to relax and roll outwards.
6. Next, let your tummy muscles become soft and relaxed.
7. Think about your fingers and let them become limp and still. Allow this feeling of relaxation to spread up your arms to your shoulders.
8. Let your shoulders relax and drop easily.
9. Let your neck muscles relax. Your head is resting and supported. Enjoy this feeling of relaxation.
10. Allow your face and expression to relax; make sure your teeth are not clenched and let your jaw rest in a relaxed position.
11. Now, as your body feels relaxed, become aware of the all-over sensation of letting go, of quiet, calm and resting. Enjoy this feeling of relaxation. If you find your mind becoming busy again, check where your muscles have tensed and then relax them.
12. Slowly bring your attention back to the room that you're in. Have a gentle stretch and open your eyes. Remember to get up slowly once you've finished. If you have effectively relaxed, your blood pressure may have dropped and you may feel dizzy if you get up suddenly. If you bend and stretch your arms and legs a few times before standing up this should soon return to normal.

Once you feel comfortable doing this exercise, it can help to imagine pleasant or tranquil surroundings, or listen to some relaxing music. If you have an MP3 player or a smart phone you can download relaxation podcasts from the internet.

You may want to explore other relaxation techniques. Relaxation CDs and tapes may be available from your local library. Some hospitals, cancer centres and hospices offer breathing control and relaxation sessions. Ask your doctor or nurse whether any are suitable for you.



Our CD Relax and breathe can help you learn ways to manage breathlessness. There's a copy on the inside back cover of this booklet.

Breathing techniques

Breathlessness can be a difficult symptom to live with, but there are ways you can reduce its impact on your life. Learning some breathing techniques can help.

It may be more helpful to practise these breathing techniques for the first time when you're not feeling too breathless, if possible. That way you'll become familiar with the techniques and will know how to use them during episodes of breathlessness. Knowing that there are things you can do when you feel breathless will also give you a sense of control. It might be helpful for someone to read the information to you when you practise the exercises for the first time.

'As soon as I get up in the morning I do some deep breathing exercises, just on the edge of my bed. Then I get dressed and come downstairs. I usually make myself a bit of breakfast, and then I do some more deep breathing exercises.'

Brian

Get into a comfortable position

When you feel breathless, it can help to be in a comfortable position that supports your upper chest muscles and allows your diaphragm and tummy to expand.

On the next page, we describe four comfortable sitting and standing positions. They are also shown in the photos on page 23.

If you are in bed, make sure you are sitting in an upright position with your back supported by pillows so that you can expand and open your chest area. Allow your head to rest back gently on the pillow so you can feel a release of tension in your neck. Rest your arms against your sides, supported by pillows if this is more comfortable.

Position 1

- Sit in a chair in an upright position, with your back supported, legs uncrossed and feet resting comfortably on the floor.
- Let your shoulders drop and feel heavy, with your arms resting softly in your lap.
- Keep your head upright.

Position 2

- Sit in a chair and lean forward with your upper body.
- Have your legs uncrossed, feet on the floor and shoulders relaxed.
- Slowly move forward a little so that your elbows and lower arms are resting on your thighs, supporting your upper body.
- Keep your knees shoulder-width apart and let your chest relax when you lean forward.

Position 3

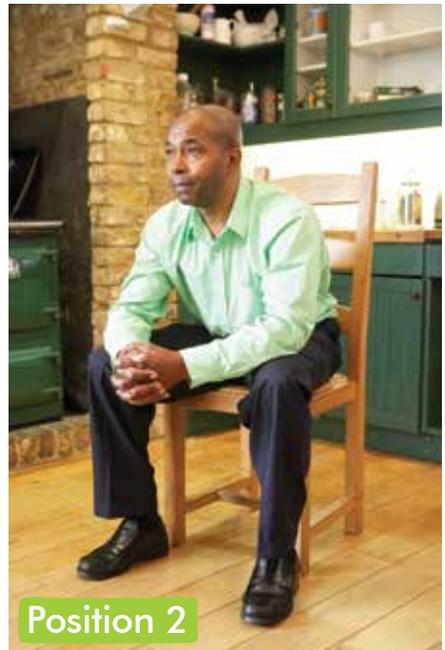
- Stand and lean forward on to a secure surface.
- Let your arms and elbows rest on the surface, so that you're supporting the weight of your upper body.
- Keep your shoulders and chest relaxed by letting your forearms remain shoulder-width apart.

Position 4

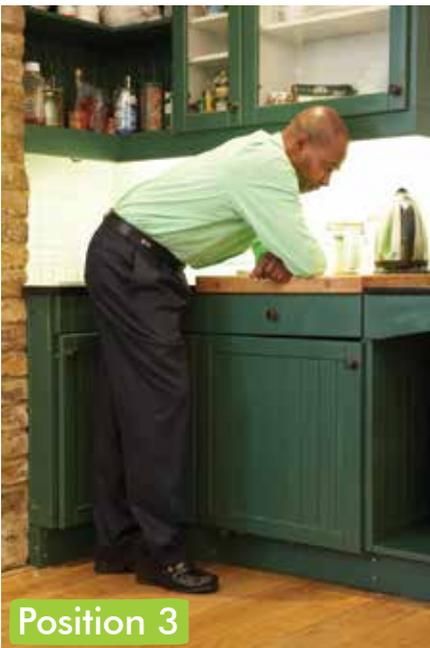
- Stand in an upright position and lean back against a secure surface. A wall is best.
- Let your arms drop to your sides and make your shoulders heavy and relaxed.



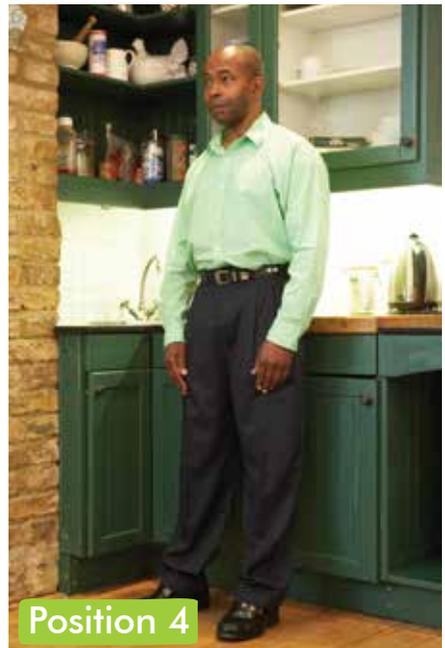
Position 1



Position 2



Position 3



Position 4

Controlled breathing

Breathlessness can cause you to breathe with your upper chest and shoulder muscles rather than your diaphragm and lower chest. This causes fast and shallow breathing, which can use up a lot of energy and tire you out.

An important part of managing breathlessness is learning a technique called controlled breathing, which uses your diaphragm and lower chest muscles. Controlled breathing can help you breathe more gently and effectively. It can also help you relax.

If you practise this when you're not too short of breath, you will become familiar with it and so be able to use it to help you when you're more breathless.

1. Sit comfortably with your neck, shoulders and back well-supported – an upright chair is ideal (see the first photo on page 23).
2. Relax your shoulders.
3. Breathe in gently, through your nose if possible. Try to use your lower chest to breathe so, when you inhale, it is your tummy area that expands rather than your upper chest.
4. Breathe out slowly and watch your tummy sink back down.

How to check whether you are breathing from the lower chest:

Place your hands on your tummy, just below your ribcage. As you breathe in, you should feel your hands rising. As you breathe out, your hands will sink back down and in. Your upper chest and shoulders shouldn't move very much at all.

When practising controlled breathing, try to get a sense of breathing from around the tummy area rather than from your upper chest. Try to feel your lungs expand as more air is able to get in.

It may also help to sit sideways next to a mirror so that you can see your lower chest moving in the reflection.

Breathe gently

Once you are in a comfortable position, try breathing in through your nose and out gently through your mouth. Some people find it helpful to breathe out through pursed lips – as if blowing out a candle. If you find breathing in through your nose difficult, breathe through your mouth instead.

Relax your shoulders and upper chest muscles

When you breathe out, feel your shoulders and upper chest relax. As you breathe in gently, keep your shoulders relaxed. If this is hard to do, ask someone to press down gently on your shoulders to help relieve some of the tension.

Breathe in slowly and out gently, feeling your upper chest muscles relax more and more with each breath out.

Try to remember this during day-to-day life. Gradually, you'll be able to adjust your breathing so it's more effective and relaxed.

It can take a bit of time to get used to these exercises. Try not to force the exercises or expect instant results. Aim for a gradual change from breathlessness to controlled breathing.

Using a handheld fan

Using a handheld fan is a simple but important way of easing breathlessness. It can help you recover more quickly when you experience breathlessness. You may also find a floor-standing fan or desktop fan effective.

Carry a fan with you to help you whenever you need it. Fans are small and light and easily fit into a handbag or pocket.

When using a fan:

- get into a comfortable position (see page 22) – if you're uncertain about positioning, ask a doctor, nurse or physiotherapist at the hospital
- hold the fan yourself if possible – about 15cm (6in) away from your face
- let the cool air blow towards the upper and central part of your face, always including your nose and mouth.

Sitting in front of an open window with the cool air blowing over your face can also be helpful. Some people find putting a cool flannel on their face effective.

You can watch a video on how to use a handheld fan the correct way at cuh.org.uk This video has been made by the Breathlessness Intervention Service of Cambridge University Hospitals.

Medicines for breathlessness

There are a number of different medicines that can relieve breathlessness. You can discuss this with your GP or a doctor or nurse at the hospital.

Painkillers can sometimes be used to help relieve breathlessness. For example morphine can be taken in tablet or liquid form, or by injection under the skin.

Sedative drugs can help to relieve anxiety and panic, which some people experience because of their breathlessness.

Steroids can help reduce inflammation in the airways of the lungs, which then helps to reduce breathlessness.

Bronchodilator drugs widen the air passages and increase airflow. These medicines can be given in tablet form or through an inhaler. Spacer devices are often given with inhalers. These greatly improve the delivery of the drug to the lungs, making the medicines more effective when you are breathless.

These drugs can also be given through a nebuliser. A nebuliser is a small machine that turns the liquid drug into a fine mist, so you can breathe it deep into your lungs. A tube connects the machine to a face mask or a mouthpiece. You breathe through the mask or the mouthpiece to inhale the drug.

Sterile salt water (saline) can be given through a nebuliser to loosen sticky phlegm.

Diuretics (medicines to help you pass more urine) can help you get rid of excess fluid if your breathlessness is caused by a build-up of fluid in the lungs (pulmonary oedema).

If you find tablets difficult to swallow, discuss this with your GP or a nurse or doctor at the hospital. They can suggest different ways of giving you your medicine.

Oxygen treatment

Oxygen treatment is only suitable for some people who are breathless. Using a fan or sitting by an open window with cool air blowing onto your face may give the same benefit (see page 26). Your doctor will prescribe oxygen treatment if it might help you.

If you or someone at home smokes, oxygen cannot be prescribed because there is a risk of explosion and fire. You need to discuss this with the doctor who is prescribing oxygen. Smoking is not allowed in a house where there is home oxygen present.

If you only need oxygen for short periods of time, an oxygen cylinder may be recommended. This is a storage tank containing oxygen for you to breathe.

If you need oxygen for longer periods of time, you may have an oxygen concentrator. This is a larger machine that takes and filters oxygen from the surrounding air to supply to you.

With a cylinder or concentrator, you breathe in the oxygen using a face mask or through small tubes that sit under the nostrils (nasal cannula). Try using a water-based lubricant like KY Jelly® to stop your lips or nostrils becoming dry if you're having this treatment.

If you want to go out but need oxygen, a bracket can be fitted to your wheelchair to carry the cylinder. Ask the wheelchair service about this.

If you'd like to travel when using oxygen, there are a few things to keep in mind. You can find out more about this from the British Lung Foundation (see page 55) or your local NHS service (see page 60).

Complementary therapies

Finding a complementary therapy that helps you to relax may help you manage your breathlessness. Therapies such as acupuncture, aromatherapy and meditation may be helpful.



We have a booklet called **Cancer and complementary therapies**, which we can send you.



**'I know what I want to do,
but I also know what I can
do. That helps me accept
things instead of pushing
myself, and I am much
more relaxed as a person.'**

Asuka

MANAGING EVERYDAY LIFE

Practical tips for everyday activities	32
Diet	36
Going out	39
Sex and breathlessness	42
Your feelings	44
Who can help?	46

Practical tips for everyday activities

It's good to keep active, but when you are breathless everyday activities can sometimes feel overwhelming. Some of the following tips may help.

Prioritise

Save your energy for the things that most need doing, or are most important to you. Before doing a task, consider whether you need to do it. If it's not necessary, choose not to do it. If it's a more strenuous task, ask family or friends to help. Do everything the easiest way you can. Give yourself extra time to do things so that you are not rushed or stressed. You will then be less likely to become breathless.

Plan ahead

It's possible to make some tasks easier by planning ahead. For example doing your shopping online or asking someone to do it for you. Most supermarkets offer online shopping and home delivery. You might also find that tasks are easier at a certain time of day. If that's the case, plan ahead so you can do the things you want to at times when you're likely to find them easier.

Pace yourself

Keep a balance between periods of activity and periods of rest. You may want to take a break during an activity as well.

Around the house

- Think about ways to arrange your home to make tasks easier. For example putting a chair in a hallway or on a stair landing so you can rest when walking between rooms.
- Sit down to carry out everyday tasks like washing, dressing or preparing food.
- Arrange your kitchen with frequently used items stored at waist height, so you don't have to bend or stretch to cupboards or shelves.
- Try to avoid bending from the waist down, as this can restrict your breathing. Instead, try easing yourself into a crouching position while keeping your back straight and bending your knees. This keeps your chest upright and your shoulders back. You may find it helps to hold on to a secure piece of furniture such as a sofa when you do this. Some people find using a pick-up stick or reacher useful. An occupational therapist can give you advice on this.

'Bending is a big problem for me. I have to be very careful if I need to pick something up from the ground. I must bend my knees like I'm sitting and then pick it up.'

Terry

- Try not to lift heavy items as this can make you tired and short of breath. Laundry or shopping can be carried more easily in a trolley. Allow yourself as much rest as you need. Don't be afraid to ask for help from family and friends. If you live alone and are struggling, talk to your doctor about what help is available.
- Pushing rather than pulling a trolley is easier for some people. Resting on the handle in a forward leaning position may also be helpful.
- Keep a phone close by – using a telephone extension cord, cordless or mobile phone will make this easier. If your phone is in another room, ask people to give you plenty of time to answer.
- An intercom, such as a baby monitor, is a good way of talking to someone in another room without having to shout or get up, especially at night.
- Placing several pillows behind you in bed can help support you in a more upright position. Ask for a physiotherapy referral to find out what positions are best for you.

Dressing

- Sit down when dressing. Choose loose-fitting clothes, especially around the waist and chest. Bring your feet up to put on socks, tights and shoes, as bending can make you breathless. Slip-on shoes are easier to get on and off than shoes with laces.
- When you undress, don't hold your breath as you take clothes over your head. Take your arms out of your top first, then quickly slip it over your head. This means your face is only covered for a short time and you don't have to raise your arms for too long.

Bathing

- Bathrooms can become warm and quickly fill with steam. When bathing, open a window or leave the door slightly open.
- Once you're undressed, sit at the side of the bath and slowly lift in one leg at a time. After bathing, let the water drain out before you get out. You may find it easier to kneel up first and rest for a few moments before standing up.
- Keep the water warm but not too hot, as this can make you breathless. If you shower, try to keep the spray away from your face. Some people find it helps to turn the water off while they soap themselves, and then turn it back on to rinse off. Sit safely on a seat or stool in the shower if there's enough space.
- A large towel wrapped around you, or a bathrobe, will help you get dry without vigorous rubbing and patting. Keep sitting down while you dry off. Bring your feet up so that you don't have to bend to dry them. Remember to keep using gentle, controlled breathing from your tummy (see pages 24–25).

Going to the toilet

- If you have difficulty getting to the toilet, a urine bottle or commode (portable toilet seat and bowl) can help. A district nurse can arrange for you to have one if needed. Your hospital or GP can arrange for you to have a district nurse.
- Equipment and aids such as grab rails, a raised toilet seat and a bath board can make bathing and going to the toilet easier.

An occupational therapist (see page 46) can visit you to see what might help make things easier for you around your home.

Diet

You may find that breathlessness can cause problems with eating. If your appetite is poor, you can add high-protein powders to your normal food or replace meals with nutritious, high-calorie drinks. These are available from most chemists and can be prescribed by your GP or a dietitian. You can ask to be referred to a dietitian at your hospital. If you are at home, your GP can arrange this for you.

Here are some other tips:

- Smaller meals on a smaller plate are easier to manage.
- Eat slowly and take smaller mouthfuls.
- Try to avoid chewy food.
- Try adding sauces or gravies to make food easier to eat.
- Drink sips of fluid often. This can help keep your mouth moist and stop phlegm getting sticky, making it easier to cough up. Drink at least 1.5 litres (3 pints) of fluid a day if you can.
- Frozen ready meals can help on days when preparing food feels too difficult.
- Having a small alcoholic drink like sherry or brandy before a meal can help to improve your appetite.



Our booklet **Eating problems and cancer** has more information.

Dry mouth

Being short of breath can cause you to breathe more through your mouth and less through your nose. This can cause your mouth and tongue to become dry, leaving a bad taste.

Tips if you have a dry mouth

- If your tongue is 'coated' it may make your food taste unpleasant and might put you off eating. If your tongue is coated a lot of the time, ask a member of your healthcare team for further advice.
- Frequent drinks, even if you just take a few sips at a time, can help keep your mouth moist. You may find fizzy drinks the most refreshing. Keep a glass of water by your bedside and carry water with you when you go out.
- Try sucking ice cubes or ice lollies. You can make lollies by freezing fresh fruit juice in ice-cube trays or in special lolly containers with sticks.
- Keep your food moist with sauces and gravies.
- Avoid chocolate and pastry as they can stick to the roof of your mouth.
- Tell your doctor about your dry mouth. They can prescribe mouthwashes, lozenges or artificial saliva sprays or gels if you think they might help.

- Use lip balm for dry lips, but do not use any balm on your lips during radiotherapy treatment. Speak to your clinical nurse specialist or radiotherapy team about this.
- If you need to moisten your lips while having oxygen, you should use a water-based lubricant (for example K-Y Jelly) and not petroleum jelly.

i You may find it helpful to read our fact sheets, **Dry mouth (xerostomia) and Mouth care during chemotherapy.**



Going out

If you're planning a day out somewhere unfamiliar, it may be helpful to get some information in advance. You might want to find out whether there's a lift, parking and transport facilities and how far you'll have to walk to your destination.

The air in some places may be drier, for example if it's a cold, dry day, or if there is air conditioning. This can cause a dry mouth (see pages 37–38) or coughing. Taking a small bottle of water with you can be useful. You should also keep a handheld fan with you to help if you have an episode of breathlessness (see page 26).

Some people find that when the air is cold outdoors it can help to place a scarf across their mouth. This warms and adds moisture to the air they breathe in.

When you're walking outdoors, take it slowly and use controlled breathing (see pages 24–25). Try to bring the rhythm of your breathing in line with your walking. You can do this by breathing in on one step then out on the next two steps.

Aids such as a walking stick, a wheeled frame or a wheelchair can be useful when you're outdoors, particularly for longer trips. Your nurse, physiotherapist or occupational therapist can arrange these for you. You can also hire wheelchairs from the British Red Cross (see page 60). Your local shopping centre or supermarket may also have wheelchairs you can borrow while you're there.

The Shopmobility, Motability and Blue Badge schemes (see pages 60–61) may be able to help you get out and about if you have reduced mobility. Ask your nurse, occupational therapist or social worker for details.

Physical activity

Physical activity can improve your breathing by helping you to be as fit as possible and make you feel better. Even people with severe breathing problems can benefit from small amounts of physical activity.

Physical activity won't necessarily make you breathless, especially if you take it slowly and use controlled breathing as much as possible (see pages 24–25). You may get breathless but eventually you will be able to do more before you get breathless. You'll also find that getting breathless will not hurt you, although it is an unpleasant feeling.

By gradually increasing the activity you do, you'll become fitter and your muscles will get stronger. Over time, you'll be more confident in your ability to control your breathing, and know when and how to do this.

Trying some physical activity

Start slowly by doing movements with your arms and legs while you're sitting down. Then set yourself goals that are right for you. This could be walking about from room to room, going to the front door, to the garden, or going out for a short walk. You can gradually build up what you do.

Remember to take it slowly, use controlled breathing and match your breathing rhythm to your steps. You may find that you're able to do a bit more each time. This will help you manage your everyday activities more comfortably. A physiotherapist (see page 46) can give you advice on the right type of physical activity for you. A pedometer or step counter can help you to gradually increase the amount of walking you do each week.

Keeping a diary

It can be helpful to keep a note of when your breathlessness has been difficult, activities that made it worse and what techniques you used to deal with it. You may find there are certain times of the day when you need more energy, such as in the morning when you're getting dressed. Or you may find there are certain things that make your breathlessness worse, such as feeling stressed.

You can also use a diary to plan activities for times of the day when you feel better, and to remind you to practise controlled breathing and relaxation techniques.

Making a plan for when you are breathless

You may find it helpful to write down a plan for when you feel breathless. For example a resting position that you know helps, if you would like the fan to be turned on or the window opened. This helps any carers you have to be aware of things that help you.

'I learnt to plan and do things in small bursts of activity. I just had to slow down in order to manage my breathing and fatigue.'

Helen

Sex and breathlessness

You may be worried about the impact of breathlessness on your sex life. If you have a partner, they may also be thinking about this. Sex requires energy and is demanding for the heart and lungs. It's important to recognise this and make some changes. Here are a few suggestions that may help:

- Be open with your partner about your concerns and what may help – this can help you both enjoy a fulfilling sex life.
- Talking, hugging and touching are all important parts of intimacy that don't use up too much energy.
- Try to have sex when you're feeling rested and your breathing is at its best.
- You might find it helpful to have sex at a certain time of day – for example early evening rather than late at night.
- Some positions use less energy. You may need to try different positions to keep breathlessness to a minimum. The British Lung Foundation (see page 55) has illustrations of suggested sexual positions for people with breathlessness.
- Make sure you're as relaxed as possible and take things slowly.
- Sex after a heavy meal or alcohol might be more difficult as your stomach will be full. Alcohol can also affect your sexual function.

- If you have oxygen at home, it may be helpful to use it before, during and after sexual activity.
- If you feel breathless while having sex, pause and take a few deep, slow breaths from your lower chest, rather than stopping altogether.
- Speak to your GP or specialist nurse at the hospital if you want any other advice. They can refer you to a sexual health counsellor.



We have information for men and women about sexuality and cancer.



Your feelings

Your feelings may change at different times during your illness. Some days you may feel well and relaxed, while on others you may feel frightened, stressed, angry, sad and even guilty. These are normal responses to breathlessness, the cancer, the treatment and any fears you have about the future. There's no right or wrong way to deal with these feelings, but accepting they are normal will help.

Sometimes you may feel that you need to be alone, while at other times you may want to be with people. Go with what feels right for you at the time where possible. You may have family and friends who find your changing emotions difficult to understand. But try talking together about how you each feel. This can help you understand each other better and be able to cope with the problems more easily.

You may find it helpful to talk to other people who are going through similar experiences. You can find out about support groups in your area by calling us on **0808 808 00 00** or visiting **[macmillan.org.uk/selfhelpandsupport](https://www.macmillan.org.uk/selfhelpandsupport)**. You can also share your experiences of breathlessness with others on our Online Community – visit **[macmillan.org.uk/community](https://www.macmillan.org.uk/community)**

Feeling depressed

Many people feel sad as a result of their cancer and difficult symptoms such as breathlessness. This is a natural response. Sometimes, these feelings of sadness don't seem to pass but get worse and you may become depressed.

Depression can come on gradually and may be difficult to recognise. If you're depressed, it may be harder for you to follow your treatment plan or your health professionals' advice.

Depression can usually be successfully treated in most people. The first step to feeling better is getting appropriate help. If you or your family think you may be depressed, discuss it with your GP. They can prescribe an antidepressant drug for you, or refer you to a doctor or counsellor who specialises in the emotional problems that people with cancer might experience. By getting depression treated, you'll make life easier for yourself, your family and your friends.

Feeling isolated

People with breathlessness can sometimes become isolated if they're less able to go out and meet family or friends. Talking in a large group of people can also be very tiring.

You may feel that you'd rather avoid these types of social situations. If you do feel isolated, it may help to talk to your family and friends. Tell them how you feel and how much you're able to do. Together, you may be able to find a way to continue seeing each other that is less tiring for you.



We can send you our booklet **How are you feeling?**
The emotional effects of cancer.

Who can help?

Many people are available to help you and your family manage the problems that breathlessness can cause.

A **clinical nurse specialist** can give you practical advice and refer you to other members of the healthcare team to help you manage your breathlessness in the most effective way. Clinical nurse specialists can also help you find support groups in your area.

Physiotherapists can help you learn breathing techniques. They can offer expert advice on gentle exercise and relaxation, and show you new ways of carrying out day-to-day activities that may be causing you problems.

Occupational therapists can help you develop ways of completing tasks and activities at home that are safe and stop you from getting too breathless. They may be able to give you simple but effective gadgets that can make everyday chores easier to manage. They can also offer expert advice on relaxation and how to pace your daily activities.

Dietitians can give practical advice on food that makes eating easier when you're breathless. They can also look at your nutritional needs and prescribe supplement drinks if you struggle to eat enough solid food every day.

Different people can offer support in the community. **District nurses** work closely with GPs and, if needed, can make regular visits to patients and their families at home.

In many parts of the country there are also specialist nurses called palliative care nurses. They're experienced in assessing and treating your symptoms, and they can offer you support from when you're diagnosed with cancer. They can also visit you at home and support you and your family.

Some **palliative care nurses** are linked to the local hospice. Your GP can usually arrange for you to be seen by a specialist nurse at home. Your local hospice or palliative care team at your cancer centre may be able to offer you specialist help with your breathing - sometimes they will have a specialist team for this symptom.

Palliative care nurses are sometimes referred to as Macmillan nurses. However, many Macmillan professionals are nurses who have specialist knowledge about a particular type of cancer. You may see them when you're at a clinic or in hospital.

Marie Curie nurses help to care for people who are having treatment to control their symptoms and want to stay in their own homes. They provide nursing care during the day and overnight. The district nurse usually decides whether to request a Marie Curie nurse.

The **hospital social worker** can give you information about social services and other benefits you may be able to claim. For example, you may be entitled to meals on wheels, a home helper or money to help with hospital transport costs. The social worker may also be able to help arrange childcare during and after treatment and, if necessary, help with the cost of childminders.



CANCER

SURVIVAL RATES
BY TREATMENT

UNDERSTANDING THYROID CANCER (DUCULAR AND PAPILLARY)

SEX AND RELATIONSHIPS

SIDE EFFECTS OF CANCER TREATMENT
A practical guide to living with and after cancer

FURTHER INFORMATION

About our information	50
Other ways we can help you	52
Other useful organisations	55

About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

Order what you need

You may want to order more leaflets or booklets like this one. Visit [be.macmillan.org.uk](https://www.be.macmillan.org.uk) or call us on **0808 808 00 00**.

We have booklets on different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer and information for carers, family and friends.

All of our information is also available online at [macmillan.org.uk/cancerinformation](https://www.macmillan.org.uk/cancerinformation)

There you'll also find videos featuring real-life stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- Easy Read booklets
- ebooks
- large print
- translations.

Find out more at [macmillan.org.uk/otherformats](https://www.macmillan.org.uk/otherformats)

If you'd like us to produce information in a different format for you, email us at cancerinformationteam@macmillan.org.uk or call us on **0808 808 00 00**.

Help us improve our information

We know that the people who use our information are the real experts. That's why we always involve them in our work. If you've been affected by cancer, you can help us improve our information.

We give you the chance to comment on a variety of information including booklets, leaflets and fact sheets.

If you'd like to hear more about becoming a reviewer, email reviewing@macmillan.org.uk You can get involved from home whenever you like, and we don't ask for any special skills – just an interest in our cancer information.



Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we're here to support you. No one should face cancer alone.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our free, confidential phone line is open Monday–Friday, 9am–8pm. Our cancer support specialists can:

- help with any medical questions you have about your cancer or treatment
- help you access benefits and give you financial advice
- be there to listen if you need someone to talk to
- tell you about services that can help you in your area.

Call us on **0808 808 00 00** or email us via our website, **macmillan.org.uk/talktous**

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. There, you can speak with someone face to face.

Visit one to get the information you need, or if you'd like a private chat, most centres have a room where you can speak with someone alone and in confidence.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That's why we help to bring people together in their communities and online.

Support groups

Whether you are someone living with cancer or a carer, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting [macmillan.org.uk/selfhelpandsupport](https://www.macmillan.org.uk/selfhelpandsupport)

Online community

Thousands of people use our online community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at [macmillan.org.uk/community](https://www.macmillan.org.uk/community)

The Macmillan healthcare team

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

'Everyone is so supportive on the online community, they know exactly what you're going through. It can be fun too. It's not all just chats about cancer.'

Mal

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you've been affected in this way, we can help.

Financial advice

Our financial guidance team can give you advice on mortgages, pensions, insurance, borrowing and savings.

Help accessing benefits

Our benefits advisers can offer advice and information on benefits, tax credits, grants and loans. They can help you work out what financial help you could be entitled to. They can also help you complete your forms and apply for benefits.

Macmillan Grants

Macmillan offers one-off payments to people with cancer. A grant can be for anything from heating bills or extra clothing to a much-needed break.

Call us on **0808 808 00 00** to speak to a financial guide or benefits adviser, or to find out more about Macmillan Grants. We can also tell you about benefits advisers in your area. Visit [macmillan.org.uk/financialsupport](https://www.macmillan.org.uk/financialsupport) to find out more about how we can help you with your finances.

Help with work and cancer

Whether you're an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit [macmillan.org.uk/work](https://www.macmillan.org.uk/work)



Macmillan's My Organiser app

This free mobile app can help you manage your treatment, from appointment times and contact details, to reminders for when to take your medication. Search 'My Organiser' on the Apple App Store or Google Play on your phone.

Other useful organisations

There are lots of other organisations that can give you information or support.

Breathe Easy (British Lung Foundation Support Group Network)

www.blf.org.uk/BreatheEasy

Provides support and information for people living with a lung condition, and for those who look after them.

Breathlessness Intervention Service (BIS)

www.cuh.org.uk/breathlessness

A service that operates from the Cambridge University Hospitals website. It has videos and a range of fact sheets that give information on managing breathlessness. Also has audio clips for relaxation.

British Lung Foundation

73–75 Goswell Road, London EC1V 7ER.

Helpline 03000 030 555
(Mon–Fri, 9am–5pm)

Email helpline@blf.org.uk

www.blf.org.uk

Provides information on all types of lung condition and runs support groups across the country. Also offers information on issues such as travel, oxygen, equipment and financial benefits.

Mesothelioma UK

c/o Glenfield Hospital, Groby Road, Leicester LE3 9QP

Helpline 0800 169 2409
(Mon–Fri, 8.30am–16.30pm)

Email mesothelioma.uk@uhl-tr.nhs.uk

www.mesothelioma.uk.com

A resource centre dedicated to providing specialist mesothelioma information, support, care and treatment. Has a helpline. All services are free.

The Roy Castle Lung Foundation

The Roy Castle Centre, 4–6 Enterprise Way, Wavertree Technology Park, Liverpool, Merseyside L13 1FB

Helpline 0333 323 7200

Email from website

www.roycastle.org

Provides information and support (financial and emotional) to people with lung cancer. Also runs support groups and campaigns for lung cancer patients.

Support with stopping smoking

Smokefree

Tel: 0300 123 1044 (Mon–Fri, 9am–8pm, Sat and Sun, 11am–4pm)

www.nhs.uk/smokefree

Offers free information, advice and support via the helpline and website to people who want to give up smoking, or who have given up and do not want to start again.

Smokeline

Tel 0800 84 84 84 (Daily, 8am–10pm)

www.canstopsmoking.com

Scotland's national stop smoking helpline. Smokeline advisers are specially trained to help you quit. The website also has tips and information.

Stop Smoking Wales

Tel 0800 085 2219

www.stopsmokingwales.com

A free NHS service to help people quit smoking. Advisers can give you advice on quitting and on products that could help. Also offers support programmes, group sessions, and practical tips on the website.

Want2stop

Tel 080 812 8008

www.wanttostop.info/

Website run by the Northern Ireland Public Health Agency. Offers a range of information and advice for those wanting to quit smoking, including information on local cessation services.

General cancer support organisations

Cancer Black Care

79 Acton Lane,
London NW10 8UT

Tel 020 8961 4151

Email info@cancerblackcare.org.uk

www.cancerblackcare.org.uk

Offers information and support for people with cancer from ethnic communities, their friends, carers and families.

Cancer Focus

Northern Ireland

40–44 Eglantine Avenue,
Belfast BT9 6DX

Helpline 0800 783 3339

(Mon–Fri, 9am–1pm)

Email hello@cancerfocusni.org

www.cancerfocusni.org

Offers a variety of services to people affected by cancer, including a free helpline, counselling and links to local support groups.

Cancer Research UK

Angel Building,
407 St John Street,
London EC1V 4AD
Tel 0300 123 1022

www.cancerhelp.org.uk

Has patient information on all types of cancer and has a clinical trials database.

Cancer Support Scotland

The Calman Centre,
75 Shelley Road,
Glasgow G12 0ZE
Tel 0800 652 4531

Email info@cancersupportscotland.org

www.cancersupportscotland.org

www.cancersupportscotland.org

Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

Macmillan Cancer Voices

www.macmillan.org.uk/cancervoices

A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

Maggie's Centres

20 St. James Street,
London W6 9RW
Tel 0300 123 1801

Email enquiries@maggiescentres.org

www.maggiescentres.org

Provides information about cancer, benefits advice, and emotional or psychological support.

Penny Brohn Cancer Care

Chapel Pill Lane,
Pill, Bristol BS20 0HH

Helpline 0845 123 2310

(Mon–Fri, 9.30am–5pm,
Wed 6–8pm)

Email

helpline@pennybrohn.org

www.pennybrohn.org/cancercare.org

Offers a combination of physical, emotional and spiritual support, using complementary therapies and self-help techniques.

Riprap

Maggie's, The Stables,
Western General Hospital,
Crewe Road,
Edinburgh EH4 2XU

www.riprap.org.uk

Developed especially
for teenagers who have
a parent with cancer.

Tenovus

Head Office,
Gleider House,
Ty Glas Road,
Cardiff CF14 5BD

Helpline 0808 808 1010
(Mon–Sun, 8am–8pm)

Email [info@](mailto:info@tenovuscancercare.org.uk)

tenovuscancercare.org.uk

www.tenovus.org.uk

Aims to help everyone get
equal access to cancer
treatment and support.
Funds research and provides
support such as mobile
cancer support units, a free
helpline, an 'Ask the nurse'
service on the website and
benefits advice.

General health information

Health and Social Care in Northern Ireland

www.hscni.net

Provides information about
health and social care
services in Northern Ireland.

Healthtalk

Email

info@healthtalkonline.org

www.healthtalk.org

www.youthhealthtalk.org
(site for young people)

Has information about cancer,
and videos and audio clips
of people's experiences.

National Cancer Institute –National Institute of Health – USA

www.cancer.gov

Gives information on
cancer and treatments.

NHS Choices

www.nhs.uk

The UK's biggest health information website. Has service information for England.

NHS Direct Wales

www.nhsdirect.wales.nhs.uk

NHS health information site for Wales.

NHS Inform

www.nhsinform.co.uk

NHS health information site for Scotland.

Patient UK

www.patient.co.uk

Provides people in the UK with information about health and disease. Includes evidence-based information leaflets on a wide variety of medical and health topics. Also reviews and links to many health- and illness-related websites.

Equipment and advice on living with disability

The Blue Badge Scheme (Department of Transport)

Tel (England) 0844 463 0213

Tel (Scotland) 0844 463 0214

Tel (Wales) 0844 463 0215

Email: bluebadge@northgate-is.com

www.gov.uk/government/collections/blue-badge-scheme

A national scheme offering parking concessions to people with disabilities. It allows badge holders to park closer to their destination. For more information contact your local council.

British Red Cross

44 Moorfields, London, EC2Y 9AL

Tel 0844 871 11 11

Email information@redcross.org.uk

www.redcross.org.uk

Offers a number of services for people with a disability, including a medical equipment loan service and a transport service.

Motability

Tel 0300 456 4566

A scheme enabling disabled people to lease a new car, scooter or powered wheelchair by exchanging their government-funded mobility allowance.

The National Federation of Shopmobility

Tel 01933 229644

Email shopmobility@bhta.com

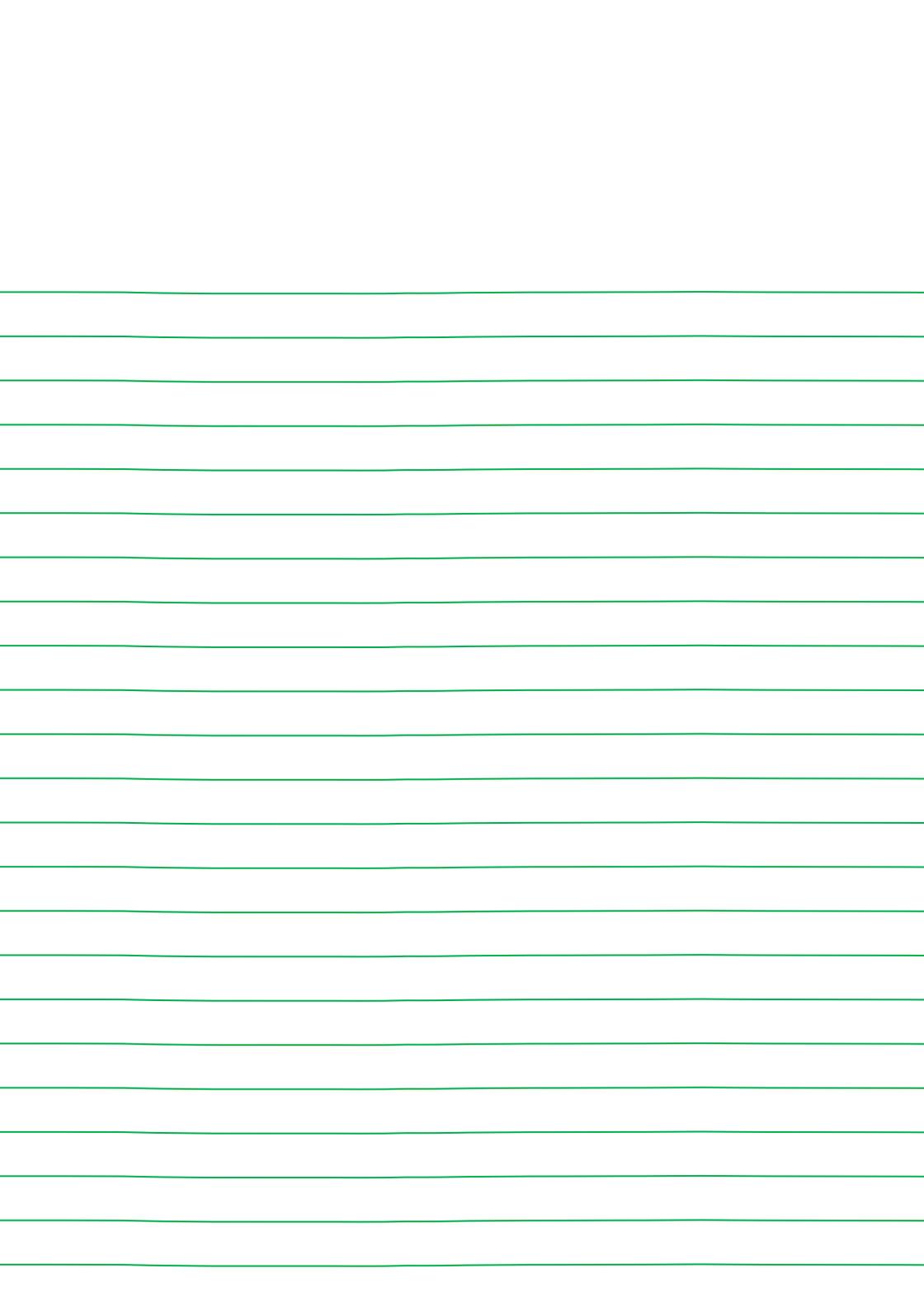
www.nfsuk.org

A UK-registered charity that supports individual Shopmobility schemes, which allow people to hire equipment such as wheelchairs and powered scooters for public places.

RADAR National Key Scheme

Offers disabled people independent access to around 7000 locked public toilets around the country. Enquire at your local authority or tourist information centre.

Keys can also be bought online:
crm.disabilityrightsuk.org/radar-nks-key



Can you do something to help?

We hope this booklet has been useful to you. It's just one of our many publications that are available free to anyone affected by cancer. They're produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we're there to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.



Share your cancer experience

Support people living with cancer by telling your story, online, in the media or face to face.

Campaign for change

We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

Help someone in your community

A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

Raise money

Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

Give money

Big or small, every penny helps. To make a one-off donation see over.

Call us to find out more

0300 1000 200

macmillan.org.uk/getinvolved

Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £

(Please delete as appropriate)

I enclose a cheque / postal order /
Charity Voucher made payable to
Macmillan Cancer Support

OR debit my:

Visa / MasterCard / CAF Charity
Card / Switch / Maestro

Card number

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Security number

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Signature

Date / /

Don't let the taxman keep your money

Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

- I am a UK taxpayer and I would like Macmillan Cancer Support to treat all donations I have made for the four years prior to this year, and all donations I make in the future, as Gift Aid donations, until I notify you otherwise.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax in each tax year, that is at least equal to the tax that Charities & CASCs I donate to will reclaim on my gifts. I understand that other taxes such as VAT and Council Tax do not qualify and that Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box.

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.



If you'd rather donate online go to macmillan.org.uk/donate

Please cut out this form and return it in an envelope (no stamp required) to:
Supporter Donations, Macmillan Cancer Support, FREEPOST LON15851,
89 Albert Embankment, London SE1 7UQ

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by Dr Sara Booth, Macmillan Consultant in Palliative Medicine and our medical editor, Dr Tim Iveson, Consultant Medical Oncologist and Macmillan Chief Medical Editor.

With thanks to: Rhys Hurst, Specialist Respiratory Physiotherapist and his colleagues at the Breathlessness Intervention Service and Long Term Conditions Service; Cathy Sandsund, Allied Health Professional Researcher; Carole White, Occupational Therapist, Specialist Palliative Care Team; and Fiona Whyte, Macmillan Senior Learning and Development Manager for Scotland. Thanks also to the people affected by cancer who reviewed this edition, and to those who shared their stories.

Sources

We've listed a sample of the sources used in the publication below. If you'd like further information about the sources we use, please contact us at **bookletfeedback@macmillan.org.uk**

British Lung Foundation. *Breathlessness*. 2015.

Cambridge University Hospital NHS Foundation Trust . *The Cambridge BIS Manual – Building a Breathlessness Intervention Service*. 2011.

Thomas S et al. Breathlessness in cancer patients: Implications, management and challenges. *European Journal of Oncology Nursing*. 2011. 15: 459-469.

Uptodate. *Assessment and management of dyspnea in palliative care* [Online]. Available from: www.uptodate.com [accessed September 2015].

Borg scale

You can point to the scale during episodes of breathlessness, or use the score to help others understand how much support you need.

We have more information about the scale on page 12.

0	Nothing at all
0.5	Very, very slight (just noticeable)
1	Very slight
2	Slight (light)
3	Moderate
4	Somewhat severe
5	Severe (heavy)
6	↓
7	Very severe
8	↓
9	↓
10	Very, very severe

More than one in three of us will get cancer. For most of us it will be the toughest fight we ever face. And the feelings of isolation and loneliness that so many people experience make it even harder. But you don't have to go through it alone. The Macmillan team is with you every step of the way.

We are the nurses and therapists helping you through treatment. The experts on the end of the phone. The advisers telling you which benefits you're entitled to. The volunteers giving you a hand with the everyday things. The campaigners improving cancer care. The community there for you online, any time. The supporters who make it all possible.

Together, we are all Macmillan Cancer Support.

For cancer support every step of the way, call Macmillan on 0808 808 00 00 (Mon–Fri, 9am–8pm) or visit macmillan.org.uk

Hard of hearing? Use textphone 0808 808 0121, or Text Relay.

Non-English speaker? Interpreters available. Braille and large print versions on request.

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MACMILLAN.
CANCER SUPPORT**