

YOUR HEALTH

Newsletter July 2021

 **Health Partners**

- **LET'S TALK HOLIDAYS!**
- **GET YOUR PINK ON - ALL ABOUT BREAST CANCER**
- **AGEING WORKFORCE - SEPARATE HANDOUT**

For more information contact your Health Partners CMO/Account Manager
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LET'S TALK HOLIDAYS!

We all love holidays, but they have the potential to present certain health challenges, especially if you have pre-existing health conditions. These challenges may include, but are not exhaustive of:

- Infection
- Jet lag
- Deep vein thrombosis (DVT)
- Sunburn/heat stroke
- Accidents – hazardous sports, drowning, road traffic accidents
- Security issues.

Most trips will be low risk (and likely within the UK this summer), but the following factors increase risk:

- Travel to remote or undeveloped areas
- Poor local infrastructure
- Restricted access to medical facilities
- Extreme climatic conditions
- Transportation challenges
- The individual's behaviours.

There are certain precautions it's worth taking note of. Implementing some common sense can help to mitigate the risks. And, of course, there is COVID-19. Some but not all, will have had their vaccinations, but even so, it is still important to follow sensible guidelines such as:

- Maintaining social distancing
- Hand hygiene
- Wearing masks when around others
- Testing and self-isolating as appropriate.

Before the trip:

- Read up about the local area, including any COVID-19 restrictions, etc
- Get medical advice about immunisations and prophylactic/preventative medication, e.g. for malaria, well ahead of the trip
- Discuss any outstanding concerns and the impact that travel may have on your pre-existing health conditions with your GP/practice nurse
- Make sure you have enough medication for your trip, including medication rescue packs for those that may need them
- Consider buying a traveller's medical kit
- Take out travel insurance
- Ensure you have sufficient masks, alcohol hand wash and wipes for everyone with you.

Deep vein thrombosis (DVT): to minimise the risk of DVT (increased risk for flights greater than five hours):

- Minimise alcohol intake and keep well hydrated
- Maintain mobility and exercise
- Wear compression stockings for those medically advised to do so, but note that poorly fitted ones can increase the risk of DVT
- Avoid tranquilising medication.

DVT risk increases with smoking, recent surgery (ten days), pregnancy, family DVT history, oral contraceptive pill and hormone replacement therapy.

On arrival, take account of jet lag, traveller's diarrhoea (use strict hygiene measures and consider antibiotics in travel kits), mosquito/malaria prevention, sun protection and pay particular attention to sexual health/alcohol/drug use.



GET YOUR PINK ON...

Breast cancer is the most common type of cancer among women (includes women, trans men, people who are non-binary who were assigned female at birth, and cis gender women) in the UK. Most women diagnosed with breast cancer are over the age of 50, but younger women can also get breast cancer.

Over 55,000 new breast cancer cases are diagnosed in the UK each year. There's a good chance of recovery if it's detected at an early stage.

Breast self-exam or regularly examining your breasts on your own, can be an important way to find a breast cancer, especially when used in combination with regular physical exams by a doctor, mammography or other investigative screening tools.

In rare cases, men* can also be diagnosed with breast cancer.

Symptoms may include:

- A lump or area of thickened breast tissue
- A change in the size or shape of one or both breasts
- Discharge from either of your nipples, which may be streaked with blood
- A lump or swelling in either of your armpits
- Dimpling on the skin of your breasts
- A rash on or around your nipple
- A change in the appearance of your nipple, such as becoming sunken into your breast.

Be aware: check your breasts regularly for any changes and speak to your GP about these. This, plus regular physical exams by a doctor, mammography or other investigative screening tools are key. Most breast lumps are not cancer. They are usually fluid-filled lumps (cysts) or a fibroadenoma, made up of fibrous and glandular tissue.

Breast pain isn't usually a symptom of breast cancer. However, it is important to get anything that is unusual for you checked by your GP. The earlier breast cancer is treated, the more successful treatment is likely to be.

Risk factors:

- Being female
- Increasing age
- Lifestyle factors: obesity, alcohol intake and the use of hormone replacement therapy (HRT) increases the risk
- (Physical activity and breastfeeding, protect against breast cancer)
- Genetic factors: 5% of breast cancers are due to inherited mutations in high risk genes such as BRCA 1/2 and p53.

How to check your breasts: it only takes a few minutes. There is no special technique and you don't need training. Check the whole breast area, including your upper chest and armpits. Do this regularly to check for changes. It is as simple as TLC: **Touch Look Check.**

- Touch your breasts: can you feel anything unusual?
- Look for changes: does anything look different?
- Check any changes with your GP.





What happens next?

Mammogram and breast ultrasound:

- If you have symptoms and have been referred to a specialist breast unit by your GP, you'll probably be invited to have a mammogram, which is an X-ray of your breasts
- You may also need an ultrasound scan
- Ultrasound uses high-frequency sound waves to produce an image of the inside of your breasts, showing any lumps or abnormalities
- Women who are 50 to 70 years old are invited for breast cancer screening every three years.

Biopsy:

- A biopsy is where a sample of tissue cells is taken from your breast and tested to see if it's cancerous
- The samples are taken from an area of the breast that may look abnormal on the mammogram (or other areas).

Treatment: if you have breast cancer, you should be assigned a multidisciplinary team (MDT), which is a group of specialists working together to provide the best treatment and care.

Your treatment depends on:

- Where your cancer is in the breast
- How big the cancer is
- Whether it has spread
- The type of cancer
- How abnormal the cells look under a microscope (the grade)
- Whether you have had your menopause
- Whether the cancer cells have proteins for targeted cancer drugs
- Your general health and level of fitness.

The main treatments for breast cancer are:

- Surgery
- Radiotherapy
- Chemotherapy
- Hormone therapy
- Targeted therapy.

The type or combination of treatments you have will depend on how the cancer was diagnosed and the stage it's at.

Breast cancer diagnosed at routine screening may be at an early stage, but breast cancer diagnosed when you have symptoms may be at a later stage and require a different treatment. Your MDT should discuss with you which treatments are most suitable.

Links:

<https://breastcancer.org/>



<https://www.macmillan.org.uk/cancer-information-and-support/breast-cancer>

