The breast cancer magazine Issue 46 Spring/Summer 2024

HOW TO BOOST YOUR ENERGY LEVELS

FACING BREAST CANCER TOGETHER BROUGHT US CLOSER



STEP OUTSIDE Getting outdoors for wellbeing

GALLERY OF HOPE A groundbreaking

A groundbreaking exhibition

5 BIG RESEARCH QUESTIONS

How scientists are answering them

WHATEVER BREAST CANCER BRINGS, WE'RE HERE

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We're here

WELCOME TO VITA

This time last year, you – our Vita readers – got the chance to tell us what you think of Vita, what you want from the magazine, and what difference it makes to you.

Our 2023 reader survey has given us invaluable insights into how we can support you with interesting and useful magazine content.

You also told us what you really want to read about in Vita. And number 1 on the list of hot topics is... breast cancer research.

So in this issue, we're looking at 5 big research questions our scientists are working hard to answer.

From investigating how breast cancer cells grow and spread to finding better, more effective treatments, these are just a few of the incredible new research projects we're funding this year. Turn to page 6 to find out more.

Excitingly, this issue has not 1 but 2 cover stars. Mum and daughter Lorraine and Jenni both faced breast cancer 12 years apart. They tell us about facing breast cancer as a family and how the experience brought them closer together. Read more on page 4.

Gareth Fletcher, Vita Editor

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Facing breast cancer together brought us closer

Mother and daughter Lorraine and Jenni were diagnosed with breast cancer 12 years apart. They spoke to Isobel Sims about facing breast cancer as a family.

on **0808 800 6000** or visit breastcancernow.org

L orraine noticed a lump in her breast on a Saturday in November 2007, while she was in the shower. On the Monday she saw her GP. Within a week she'd been diagnosed with stage 3 ductal carcinoma and was planning to start treatment.

"Being in the role I was in made a massive difference to me," explains Lorraine, who was working as a lung cancer nurse in Macclesfield, a career she'd been in for over 20 years.

"It helped me get my head around what was happening. I spent the few weeks before my surgery clearing my desk and handing things over and then doing all the Christmas shopping for the family."

Lorraine had a lumpectomy in early December 2007. But because cancer was still present in the margins, she went on to have a mastectomy. After surgery, she had chemotherapy and radiotherapy.

The lowest time

"The chemo was the lowest time for me," says Lorraine.

"I had six cycles and it took me to my lowest point. You're always wondering how the next cycle is going to be. And the poor appetite and sleep, and side effects from steroids, are really hard."

Lorraine's daughter Jenni was 24 at the time and travelled from her home in Norfolk to be with her mum.

"Let's just say nurses aren't the easiest patients!" Jenni jokes.

"She was determined not to let us see when she was struggling, like with her hair falling out and things like that." Lorraine finished treatment in 2008 and had breast reconstruction a year later. She also started 10 years of letrozole.

It had been a hard time for the family, but Lorraine enjoyed getting back to things she enjoyed, including helping Jenni plan her wedding.

A shock diagnosis

It was a shock to everyone when Jenni faced her own breast cancer diagnosis in 2019. "I'd been regularly checking myself because of mum's diagnosis," says Jenni.

"I felt a tiny lump in my armpit and thought it was a swollen gland." Jenni saw her practice nurse that morning and was referred to the breast clinic within 2 weeks.

A biopsy came back as triple negative breast cancer, and she started chemotherapy soon after.

Chemotherapy was difficult for Jenni, who developed sepsis during her 5th cycle. She also missed a Christmas with her husband and children as she was so unwell after having her mastectomy and reconstruction.

"I was so upset about it

beforehand," remembers Jenni. "But I had to forgive myself for that Christmas. If I was going to have any chance of being here for any other Christmases, I had to be in hospital."

Finding out about BRCA1

Triple negative breast cancer is more common in women under 40 and women who've inherited certain altered genes.

Because of this, Jenni was offered genetic testing, which came back positive for an altered BRCA1 gene. BRCA1 usually protects us from breast cancer. But a gene alteration, which increases the risk of breast and ovarian cancer, can run in some families.

"Mum was determined not to let us see her struggling"

"Obviously when I found out, I was worried for my children," says Jenni, who has 2 daughters and a son. Lorraine and her husband were referred for genetic testing to find out if they had the gene too. Lorraine's test was positive.

"I don't have any family history of breast cancer, so it hadn't crossed my mind," says Lorraine.

"When we got the results, I was concerned about what it meant for my family including my son Andrew. The genetics counsellor said, 'What about how you feel?' But I hadn't even thought about what it meant for me."

Due to their increased risk of cancer, Lorraine and Jenni both chose to have risk-reducing surgery to remove their remaining breasts and their ovaries.

Looking to the future

Lorraine and Jenni are both doing well now. Lorraine is now retired and enjoys spending time with her grandchildren, and Jenni has had a career change since her diagnosis. She's now a health and wellbeing coach supporting people in the community to live well with cancer. Her husband. Mike, ran the London Marathon for Breast Cancer Now earlier this year.

Experiencing breast cancer together has brought Lorraine and Jenni closer.

Jenni will talk to her children about what BRCA1 means for them as they grow up, and they'll be able to decide whether to get tested when they're adults.

Jenni and Lorraine urge anyone who is thinking about having genetic testing to go for it.

"You'll be fully supported by the genetics team," Lorraine explains. "If you have an altered gene, it doesn't mean that you have to do anything – they'll help you understand what it means for you and make informed decisions."

5 BIG RESEARCH QUESTIONS

Our scientists are answering some of the biggest questions in breast cancer research. Here are just some of the incredible new research projects we're funding this year.

Is there a link between body composition and chemo side effects?

Secondary breast cancer is commonly treated with chemotherapy, but this can come with side effects. Professor Ellen Copson at the University of Southampton is conducting a trial to investigate if body composition (muscle mass and body fat levels) influences these side effects.

Ellen and her team will measure the body composition and arm muscle strength of 250 women with secondary breast cancer before they start chemotherapy. The study team will also ask questions about their mental and physical wellbeing.

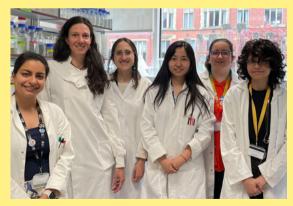
Ellen's team will then compare these measurements with the side effects that the women report.

This project could help us to better identify women who have a higher chance of severe side effects. It could also lead to more studies looking at whether the dose of chemotherapy can be changed to match someone's body composition.



Professor Ellen Copson is looking into body composition and chemotherapy side effects





Dr Elena Rainero and team are investigating how cancer cells feed themselves



How do breast cancer cells feed themselves?

Breast cancer cells don't have many nutrients available to grow, so they have to adapt. Dr Elena Rainero at the University of Sheffield is investigating how breast cancer cells use alternative food sources to grow and spread.

Elena and her team previously found that breast cancer cells can use the supportive structures of cells as food. And that they need a protein called integrin a2b1 to do this.

Elena is investigating integrin a2b1 and how it reaches the cancer cells' digestive system. She'll also block integrin a2b1 with drugs in mice and see how this affects the tumour's ability to grow and spread.

This project could lead to the discovery of cancer-specific processes, which could then be targeted with drugs.



The most common treatment for secondary breast cancer that's spread to the brain is whole brain radiotherapy, but it comes with side effects. Dr Matt Williams at Imperial College London is conducting a clinical trial for a more targeted radiotherapy treatment.

Matt and his team want to understand if this new type of radiotherapy is manageable for patients and how it affects their quality of life.

They'll also use national cancer data to better understand the survival rates, the use of health care services and the cost of secondary breast cancer in the brain.

This will help the researchers plan a larger clinical trial. This trial will then be able to directly compare the new targeted radiotherapy and existing whole brain radiotherapy.

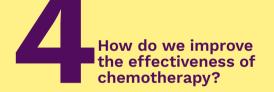
Could gut bacteria help us treat breast cancer?

Bacteria in our gut can affect our immune system. Multiple studies have shown a connection between healthier gut bacteria and better outcomes for people with cancer. Dr Stephen Robinson at Quadram Institute Bioscience is investigating how gut bacteria may help us treat breast cancer.

He's analysing and comparing bacteria found in poo samples from people with breast cancer at diagnosis, during and after treatment.

There are many questions that the research team hope to answer. Are there differences in the gut bacteria between women with and without breast cancer? Can we predict treatment outcomes by looking at someone's gut bacteria? And do treatments affect the gut bacteria over time?

This project could help us develop new treatment strategies that use gut bacteria to activate the immune system. This could improve the body's ability to prevent breast cancer from spreading.



People with triple negative breast cancer often rely on chemotherapy, but this type of cancer can sometimes become resistant. Professor Greg Hannon at the University of Cambridge wants to find ways to treat these resistant cancer cells.

Greg discovered that these cancer cells have increased activity of a protein called NRF2. This helps them resist chemotherapy, but also increases the cancer cells' need for nutrients called non-essential amino acids.

The researchers are testing whether limiting the availability of non-essential amino acids could make these breast cancer cells more vulnerable to chemotherapy. They'll do this by seeing how the cells respond to diets lacking specific nutrients, and a drug called L-asparginase.

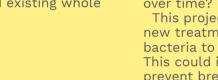
This project could help us develop new treatments that make existing chemotherapy drugs more effective. 7



Professor Greg Hannon and team hope to improve the effectiveness of chemotherapy

Want to know more about our research?

You can read an overview of every research project we fund on our website **breastcancernow.org/research-projects** And we post about our amazing researchers on our social media too.



BOOST your energy levels: tips to manage fatigue

Fatigue is extreme tiredness and can be a common side effect of breast cancer and its treatments. Rachel Baxter caught up with experts and people affected by breast cancer who share their tips for managing fatigue.





1. Try to move more

Regular moderate exercise – like walking, cycling and yoga – has been shown to reduce fatigue.

"You don't have to do vigorous exercise – just moving more may help your fatigue," says Dr John Temesi, Assistant Professor in the Department of Sport, Exercise and Rehabilitation at Northumbria University.

"Someone with young grandkids might like playing and going to the park with them. It can be easily incorporated into daily life."

Natasha was diagnosed with breast cancer in July 2023. "Gentle exercise was a godsend," she says.

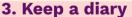
"I forced myself to go out for a walk with the dog every day during chemo, even on days where I was exhausted and didn't think I'd manage. I felt so much better, even if only temporarily, for fresh air and gentle movement."

2. Pace yourself

Listen to your body, take time to rest and do what feels best for you.

"Manage your spoons," says Karen, who was diagnosed with breast cancer in 2018. "Think of how there's only a set number of spoons available in your kitchen drawer. Once you've used them all up, you have to wait until they're replenished before using them again.

"Now imagine your energy is measured in those spoons. You can use the spoons on anything, but if you use them all up on housework and your job, what happens when there are none left? It's about learning to prioritise and accepting that on some days, if you have something you want to achieve, saving spoons you'd normally use on little tasks is worth it."



Recording the level of your fatigue on a scale of 1 to 10 each day can help you see any patterns and plan your day.

You could also use a diary to improve your sleep. "I had a sleep diary," explains Doug, who was diagnosed with breast cancer in 2012. "It helps to identify patterns and areas for improving sleep hygiene. I recorded information such as how often and how long I had napped during the day and how much caffeine and alcohol I'd had 4 hours before bed. I had details of waking times from my Fitbit and found this really helpful."



4. Eat well and stay hydrated

Eating foods that maintain your energy levels for longer – like porridge, nuts and vegetables – can reduce fatigue.

Sugary foods give you a quick fix but won't boost your energy for long.

Try to drink 6 to 8 glasses of water a day too.

"I've learnt that having a routine, building in gentle exercise, staying hydrated and eating 2 to 3 regular balanced meals in a day can help," says Anjli, who was diagnosed with breast cancer in 2016.

5. Other things to try

Some people find complementary therapies like acupuncture reduce fatigue, but you should speak to your treatment team or GP before trying them.

Cognitive behavioural therapy (CBT) or counselling can also be helpful.

Speak to your GP or treatment team in case your fatigue has a treatable cause like anaemia. You can find more tips and information about fatigue at **breastcancernow.org**



What if I have secondary breast cancer?

Fatigue is common if you're living with secondary breast cancer. It can have a significant effect on your ability to cope with the cancer and its treatment, and it can also affect everyday activities and quality of life.

In addition to the tips listed already, the following may help reduce your fatigue.

Balance activity and rest

Plan your day to get plenty of rest between daily activities. But keep naps to less than half an hour and avoid taking them in the late afternoon, so that it doesn't disrupt your sleep at night.

Manage your pain

Pain can make fatigue worse because it can affect your activity levels and sleep. Your treatment team will be able to help you control any pain.

Seek support

Talk to your treatment team or GP, or ask to be referred to your local palliative and supportive care team. They may be able to make suggestions to help you manage fatigue.

If you feel anxious or worried, you're not alone. You could try counselling, talking therapies, or join a local support group.

You can find a range of resources and support options through our Living with Secondary Breast Cancer service, and in our **Secondary breast cancer information pack**.

Getting support

You can talk to our nurses on our free helpline on **0808 800 6000** or at **breastcancernow.org** Connect with other people affected by fatigue on our forum **forum.breastcancernow.org** If you've finished primary breast cancer treatment and are experiencing fatigue, you may find our Moving Forward courses helpful. Learn more at **breastcancernow.org/moving-forward**

My confidence has grown since my breast cancer diagnosis

Less than 2 years after her breast cancer diagnosis, Patricia took to the catwalk in The Show – a fashion show like no other, featuring 24 models living with and beyond breast cancer. We caught up with her before The Show to find out why she was taking part.

In denial

Patricia had no symptoms but made an appointment at a breast screening mobile unit at her local supermarket.

"I was recalled for a second mammogram and had 2 biopsies," she says.

"Even at the end of that, I was still in denial because I thought whatever they found wouldn't be cancer. When I had the phone call it was a shock. I'd got into my 70s and never been in an operating theatre before."

Patricia was diagnosed with invasive breast cancer and DCIS (ductal carcinoma in situ) in September 2022.

"I want to raise awareness because at the moment the NHS doesn't invite you for a mammogram if you're over 71," explains Patricia, who was diagnosed at 73.

"You aren't sent a reminder and people don't often realise you can still ask for a mammogram 3 years after your previous one.

"I just made an appointment because I had the time. I never imagined that it would come out as it did.

"At least 9 friends over 71 have been screened since my diagnosis."

Uplifted

"I'm so grateful for the speedy treatment I had under the NHS," says Patricia.

"Last June I went back to see my consultant and a lady who was in the operating theatre when I had my surgery was there. I said, 'you were in the theatre when I had my operation.' And she said, 'I did your operation!' It was so lovely to meet her. She did an excellent job.

"My husband, stepdaughters and friends have been amazing throughout everything too," she says.

"I'm a Christian and I believe in prayer. After my diagnosis, I had a circle of about a dozen friends who were praying for me. I just felt so encouraged and at peace.

"I was uplifted and it just took all my nerves for the surgery away. I felt positive and had so many messages of support."

My advice

"For anyone diagnosed with breast cancer, my number 1 piece of advice would be to prepare questions before appointments – even if they feel like stupid questions," Patricia says.

"I also think talking can be really helpful. On receiving my diagnosis, I remembered a lady I'd only recently met who had a cancer journey. We immediately met for coffee and it was so useful. Just talking through little silly questions I had about the forthcoming surgery.

"I would also thoroughly recommend a Zumba class. Whilst the exercise is beneficial, the fact that you're smiling all the time is so therapeutic!"

A different focus

Patricia came across last year's Show online.

"One of the models was called Dalia," she says. "She spoke about her experience and I was so



impressed with what she was saying and what she'd gone through. She'd been running clinical trials for new cancer treatments and of course the last thing she expects is for it to happen to her. I was so impressed that I watched the whole thing.

"I joined the Facebook page and saw an advert for models. It's not me at all, but I thought, Why not do it?

"I've never done anything like this before"

"I had a call to say there'd been 427 applications and I gave a sigh of relief because I thought it won't be me. But I'm so glad it was. I remember saying, It's just so out of my comfort zone. But then it's out of everyone's comfort zone really. I've never done anything like this before. "I think my confidence has grown since my breast cancer diagnosis. I'm happy to talk about my situation and raise awareness."

Patricia met her fellow models for a photoshoot before The Show.

"It's been great to meet the other models," she says. "I'd never done a photoshoot before, so that was a really good experience. The choreographer was trying to show us how to walk – it was a laugh.

"If you're thinking about doing it, I'd definitely say have a go," Patricia adds. "I didn't for 1 minute think I would get selected and I have. So it's worth applying. It's a privilege to meet the other models.

"It's given me a different focus. Instead of worrying about my scar, or what may happen next, I can concentrate on being a model and walking proudly down the catwalk."

You can watch The Show on the Breast Cancer Now Facebook page. Applications for The Show 2025 open in July. To register your interest in taking part, email **specialevents@breastcancernow.org**



Your questions answered

Breast Cancer Now's experts answer your questions about breast cancer and its treatments.

I developed peripheral neuropathy in my hands during chemo and still have it 6 months later – does this mean it's permanent?

A Peripheral neuropathy is damage to nerves, mainly in your hands or feet that can happen as a side effect of chemotherapy. It can cause numbness, tingling, pain, problems balancing, and muscle weakness. It can affect tasks like doing up buttons or climbing stairs.

Rosiered Brownson-Smith, who researches how to reduce the side effects of chemotherapy at Northumbria University, says it's not always permanent.

"The percentage of people who are still experiencing symptoms up to 3 years after treatment does decrease drastically," she says. "It probably is quite common to still be having symptoms after 6 months. It doesn't mean that it's permanent but it's hard to predict how long those symptoms will last for."

If you're struggling with peripheral neuropathy, speak to your GP or treatment team. They may be able to prescribe medication to help with nerve pain.



I'd like to attend 1 of your face-toface courses but I can't afford the travel at the moment. Is there any help I can get?

We offer a range of free support services to people who've had a breast cancer diagnosis or continue to live with breast cancer.

Although our services are free to attend, we know that going to an event might still come at a cost. For example, you might need to get a train or taxi.

If you need help covering the costs of attending any of our support services, our access fund can help.

Some examples of what it covers include travel to and from events, hotels if staying over makes it easier for you to attend, or a British Sign Language interpreter to be with you during the event.

You can email us at

accessfund@breastcancernow.org or call 0345 077 1893 to find out more about how we can help. I've heard there's a new genetic screening programme for people with Jewish family members – how can I take part?

A In January, NHS England launched a new genetic screening programme for anyone with Jewish ancestry. The screening test will look for alterations in the BRCA gene, which increases the risk of developing both breast and ovarian cancer. Having a BRCA gene alteration is more common in people with Jewish ancestry.

To be eligible for testing you need to be over 18, live in England, and have 1 or more Jewish grandparents. You don't need to have a family history of breast cancer.

For more details about how to access testing see the Jewish BRCA website at jewishbrca.org You can also call their helpline on 020 3437 6001 with any questions about the screening programme.

Q

I'm 42 and have just been told I have secondary breast cancer. What support is available to me?

Being told you have secondary breast cancer can be overwhelming. The right support may help you to cope. We offer face-to-face and online services for people of all ages living with secondary breast cancer.

Our Living with Secondary Breast Cancer groups are facilitated by trained counsellors and meet up monthly, giving you the chance to connect and share experiences with other people who understand what you're going through.

For women under 45, our Younger Women with Secondaries Together residential event provides 2 days of information, support and sharing for younger women. There's also a monthly online group for younger women living with secondary breast cancer and online events held throughout the year.

Find out more about all our support services on our website at breastcancernow.org or call our helpline on 0808 800 6000.



ASK US

Questions about breast cancer? Call the helpline on **0808 800 6000** or visit **breastcancernow.org** for information, to order publications or to find out how to Ask Our Nurses by email.

Stel outside

From improving our mood to helping us stay active, there are lots of good reasons to get outdoors this summer.

Following my feet

For Eszter, walking became a necessity during breast cancer treatment. Eszter, who was diagnosed with triple negative breast cancer in 2021, 2 days before her 42nd birthday, started walking to hospital appointments – about half an hour from home. "I didn't have another option to

get to the hospital," says Eszter. "I was told not to take public transport while on chemotherapy, which was my first treatment, as my immune system would be

compromised." Eszter varied her walk depending on how she felt, sometimes taking a flatter route to avoid getting too out of breath. Walking also helped

with her mental wellbeing. "I always like walking because I'm an overthinker," she says.

"When I walk along the river, I get lost in my thoughts. And it helped then too as there's a lot going on in your mind when you're diagnosed with cancer."

Eszter's husband works at the Tower of London, meaning the couple and their 10-year-old son get to live inside the Tower.

Despite the city centre location, Eszter doesn't have to walk far to find peace and quiet.

"I have favourite walks along the Thames and along the canal. Although you're in the city you can't hear the traffic. I love nature and I enjoy listening to the birds." Last summer, a road trip to Hungary via Switzerland was a chance to enjoy a dramatically different landscape.

"Even when I wasn't walking, I felt I could sit and watch the mountains forever," she says.



More is better

One of the biggest benefits of getting outdoors is the opportunity to be active. Clinical Exercise Physiologist Dr Sam Orange recently spoke about physical activity on the Breast Cancer Now podcast.

"Doing any amount and any type of physical activity is beneficial," says Sam. "And doing more is better."

Regular physical activity has known benefits for people who are having or have had breast cancer treatment. "The strongest evidence is for improving things like fatigue and low mood," says Sam, who is leading a research project to improve access to diet and physical activity support after breast cancer treatment.

"And there's emerging evidence that physical activity after breast cancer treatment can help reduce the risk of breast cancer coming back."

Making a difference

Does being outdoors have benefits beyond helping us keep active?

"Getting outside helps our mood, reduces social isolation and improves wellbeing," says Joe Bartram, senior project officer at The Conservation Volunteers. The Conservation Volunteers' Green Gyms (tcv.org.uk/find-tcv) are free outdoor volunteering sessions across the UK.

"We meet up weekly and engage in a wide variety of activities, including planting trees, growing food, creating wildflower meadows, managing woodland and more," says Joe.

"Volunteers get active, learn new skills, meet other local like-minded people, and make a difference by enhancing local green spaces for both people and wildlife.

"There's no time commitment, no minimum number of sessions and volunteers can take as many or as few breaks as they wish – other than one mandatory pause for tea and biscuits!"

If you can't get out

On days you don't feel like getting out, simply reducing time spent sitting can help.

"Standing up at regular intervals or walking around the living room can be beneficial compared to just sitting down," says Sam.

"On days when you're feeling a bit better you could consider some more structured activity. That could be going for a 10-minute walk, for example."

We Are Undefeatable is a movement supporting people with a range of long-term health conditions to be active. Its website weareundefeatable.co.uk has a 5-minute mini-workout called Five in Five.

If you're living with secondary breast cancer, your treatment team can guide you on how much activity you can do depending on your situation.

Setting an example

Last year, Eszter's walking took a step up when she and 2 friends completed a 10-mile Pink Ribbon Walk at Blenheim Palace for Breast Cancer Now.

"It pushed me out of my comfort zone," says Eszter.

"I did ache the following day. But it was so nice being able to give back and do it in the countryside." Eszter used to enjoy regular home workouts but had to cut back after her diagnosis.

"A walk became a replacement for the workouts, because it wasn't as tiring," she says. Having 2 dogs also helps her get outdoors, and Eszter often walks toy poodles Lolly and Billy around the moat at the Tower.

Recently, Eszter's son Aidan came home with an application form for the Mini London Marathon.

"It's only a mile, but I said we need to train. So he's getting up earlier to do a little workout with me.

"I want to be an example to my son. I'm trying to ingrain it in him that exercise is important."



Research spotlight

Dr Sam Orange is conducting research to develop a programme to support women with diet and exercise after breast cancer.

"Surviving breast cancer doesn't always mean living well," says Sam.

"That's why we'd like to develop a support programme that'll help women with healthy eating and exercise habits after breast cancer treatment. We know that this could help them improve their quality of life."

Find out more at **breastcancernow.org/** research-projects



GALLERY OF HOPE

Ellen Millard visits a unique exhibition that highlights the value of time.

Whether it's a graduation or wedding, hitting a milestone birthday or retiring, we all have things we're looking forward to. But for many people with incurable secondary breast cancer, these future moments can be difficult to picture.

Breast Cancer Now's Gallery of Hope exhibition, which ran in the Saatchi Gallery in March and is now online, combines photographs from renowned photographer Jillian Edelstein with the latest AI technology. It brings to life future moments that 10 people with secondary breast cancer hope to be there for, with the time they hope to have.

A DREAM HOLIDAY

Nina was diagnosed with secondary breast cancer in 2021. She managed to get onto a clinical trial that was partially funded by Breast Cancer Now. Her future moment centres on family.

"It's spring 2025. My daughter's now a teenager and we're on the dream holiday in Japan we've always talked about."

For Nina, being diagnosed with secondary breast cancer changed her priorities.

"Now it's about being present," she says, "being able to have breakfast with my daughter, drop her to





school and be there when she gets home.

"I want to leave her with memories but also with the optimism that you can make the most of the time you have left."

A MOMENT OF PEACE

For David, who was diagnosed with primary breast cancer in 2019 and secondary breast cancer in 2023, his moment is 28 September 2025, his late mother's birthday.

"When I was first diagnosed, I realised I was on a raft in the middle of the ocean," says David.

"There was no one like me that I could see, and there are still so many men out there who think that."

Looking towards the future, David's message is clear. "Research and new drugs should never stop happening, because we have to find the next thing that's going to beat this."

Our research could help people living with incurable secondary breast cancer reach the moments they hope to see.

To see all the images from Gallery of Hope, visit **breastcancernow.org/hope**

IT'S BEEN AN AMAZING PRIVILEGE

Retiring after 23 years as CEO at Breast Cancer Now, Baroness Delyth Morgan reflects on achievements, breakthroughs and what's coming next.

First, congratulations on 23 years as CEO! What are the biggest achievements you've seen in that time?

There have been so many, from campaigning to raise awareness of breast cancer and access to drugs and screening, to empowering people affected by breast cancer by creating highquality information. But I think how far the science has come, in part due to the research we've funded, has been an amazing achievement.

What would you say the biggest breakthroughs have been during your time as CEO?

Definitely our understanding of how many different types of breast cancer exist, and the move to more targeted treatments for people. It's exciting to know we've contributed to identifying breast cancer genes and understanding the causes too.

What do you think the biggest challenge in breast cancer will be in the next few years?

There are a few but I think the biggest challenge will be working with the NHS. Our strength has always been our relationship with nurses and our ability to get into places where people are diagnosed and treated, but that's harder when the system is under so much pressure.

If you could sum up your time as CEO in 3 words, what would they be and why?

"Inspiring", because of the wonderful people.

"Challenging", because not everything goes smoothly but you have to pick yourself up and carry on.

And, finally, "thankful". There are only so many things you can do with your life. To have been able to lead an organisation that's so purposeful and has such a good cause has been an amazing privilege.



Do you have any plans for your retirement?

Firstly, I'll be spending a lot more time with my family. I learned the piano when I was younger, so I'm going to take that up again and try to get beyond Grade 2, and I also sing in a choir.

I'll also be spending more time in the House of Lords supporting the charity in that way, and in my spare time I'm going to do some more sewing. So really all the things you never have time to do when you're working full time!

> To find out more about our world-class research, life-changing support and how you can get involved, visit **breastcancernow.org/ about-us**

NEWS roundup

LISTEN UP!

If you'd like to hear authentic stories about life with and beyond breast cancer, check out the Breast Cancer Now podcast.

Join host Laura for open, honest conversations with guests who have personal or professional experience of breast cancer. Laura Price is a writer, podcaster and author of the novel Single Bald Female. She's living with secondary breast cancer.

Laura talks to guests about mental health, family, diet, clinical trials, work and much more. There's a new episode every 2 weeks.



Listen to the Breast Cancer Now podcast on Spotify, Apple Podcasts or wherever you get your podcasts.

SPEAKERS LIVE

Speakers Live is chance to learn from experts about different breast cancer topics, from healthy eating and exercise to hormone therapy and fertility. The events take place in real time over Zoom and you can ask questions before or during the event.

To find out more and register, search "Speakers Live" on breastcancernow.org

THE RESULTS ARE IN

A huge thank you to everyone who completed our 2023 Vita reader survey.

The survey has helped us understand

understand what you – the reader – want from the magazine. And it's given us an insight into the impact Vita has.

We know that after reading Vita 90% of you feel more supported, 93% find it reassuring to read stories of other people with breast cancer, and 92% know where to find support if you need it.

It's also highlighted some ways we can improve, tailoring the magazine to your needs and bringing you more of what you want.



NEW CHIEF EXEC CHOSEN

Claire Rowney will join Breast Cancer Now as chief executive, following Delyth Morgan's retirement (see interview page 17).

Claire is Executive Director of Fundraising, Marketing, Strategy and Innovation at Macmillan Cancer Support.

"I am over the moon to be joining Breast Cancer Now at this important point in time for people with breast cancer," said Claire.

We hope to catch up with Claire in Vita soon.



I HELD AN AFTERNOON TEA FOR MUM

After her mum's breast cancer experience, Anna knew she wanted to support our research and help other people affected by breast cancer. Hosting an Afternoon Tea was the perfect choice.

MUM WAS SO STRONG

Mum was diagnosed with breast cancer in 2016 and had weeks of chemotherapy, radiotherapy and a mastectomy. Seeing her pain, fatigue and all the emotions was awful.

She was so strong to go through it all. The experience has made us slow down and realise what's important in life.

I'VE ALWAYS LOVED BAKING

I held my first annual Afternoon Tea in 2020 and haven't stopped since. I've always loved baking, socialising and hosting events for family and friends, so it was a perfect fit. Each year, my sister and I bake sweet and savoury goods, some old favourites and some new ones.

We decorate the house too, using decorations from Breast Cancer Now's Afternoon Tea fundraising kit.

ANNA'S AFTERNOON TEA TIP

Plan what you want to bake and how long things will take. That way, you'll know if you need to bake the night before or if you have plenty of time in the morning.

PART OF MY LIFE

Breast Cancer Now has become a massive part of my life.

I did a master's degree in cancer sciences that looked at breast cancer development and had funding from Breast Cancer Now. I'm now a research assistant at a lab in Cambridge Biomedical Campus, which has also been supported by grants from the charity and others.

Seeing this important research with funding from Breast Cancer Now made me realise how important it is to fundraise for the charity.

It could be cake in the kitchen with your friends and family, or a picnic in the park with everyone you know. Hold an Afternoon Tea this August and raise money for life-changing breast cancer research and support.

To get your fundraising kit, scan the QR code, visit breastcancernow.org/afternoonteavita or call 0333 20 70 300





THANKS TO BREAST CANCER NOW'S INFORMATION, I FEEL MORE SUPPORTED, REASSURED AND IN CONTROL

/isit breastcancernow.org or call 0808 800 6000 or reliable breast cancer information



We're here

In a survey of 63 people who had used Breast Cancer Now's health information, 75% felt more supported, 72% more reassured and 70% more in control.

VITA

3 ways to subscribe to Vita magazine

- 1. Visit breastcancernow.org/vita
- 2. Email vita@breastcancernow.org
- 3. Fill in this form and send it to the address below

I'd like to receive Vita magazine twice a year

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If you already hear from us, we'll continue to contact you in the same way. From time to time, we may contact you by post to keep you updated on our work and ways you can help. You can change the way you hear from us at any time by emailing us at hello@breastcancernow.org, calling us on 0333 20 70 300 or writing to us at the address above.

To help us work more efficiently, we may analyse your information to make sure you receive the most relevant communications. This may include using publicly available information. You can ask us to stop this at any time, by contacting us using the above contact details. You can read more about how we will use your information on our website at breastcancernow.org/privacy, or contact us if you'd like a paper copy.