

CanNET

**Cancer Service Networks
National Demonstration Program**

Linking regional and metropolitan
cancer services for better
cancer outcomes



Australian Government
Cancer Australia



Northern
Territory
Government

Cancer Journeys

IN THE NORTHERN TERRITORY

NT Patient Cancer Care Referral Pathways

Breast Cancer

The *Northern Territory Patient Cancer Care Referral Pathways* have been produced by Healthcare Management Advisors (HMA) for the Northern Territory Government Department of Health and Families.

CanNET is a Cancer Australia initiative jointly funded by the Australian Government and the Northern Territory Government Department of Health and Families.

Acute Care Policy and Services Development
Department of Health and Families
87 Mitchell Street, Darwin, NT 0800
PO Box 40596, Casuarina NT 0811
Ph: (08) 8999 2778

Copies of this resource can be downloaded from the CanNET NT website at:
www.health.nt.gov.au/Cancer_Services/CanNET_NT/Publications

Table of Contents

1	Explanation of Patient Pathways	2
	Introduction	2
	Welcome to the Breast Cancer Pathway for the Northern Territory	2
	Purpose of this Pathway Document	2
	Implementation and Principles of Patient Care	3
	Future Review and Development	4
	Structure of the Pathways	4
2	NT Breast Cancer Patient Referral Pathway – Overview	5
3	NT Breast Cancer Patient Referral Pathway – Expanded View	6
4	NT Breast Cancer Patient Referral Pathway – Detailed Description	8
	Step 1 Wellness Promotion / Prevention	8
	Step 2 Early Detection	9
	Step 3 Treatment Management	11
	Step 4 Follow Up Care	14
	Step 5 Plan and Treat for Recurrence	15
	Step 6 End of Life Care	16
5	Support Services for Breast Cancer	17
	CanNET NT	17
	Physical	17
	Lymphoedema	17
	Lymphoedema Support Group NT	17
	Prostheses and Wigs	18
	Symptom Management	18
	Psychosocial	18
	Counselling	18
	Allied Health	19
	Patient Assistance Travel Scheme (PATS)	20
6	Other Useful Sources of Information on Breast Cancer	21
	For the General Public	21
	Breast Cancer Network Australia (BCNA)	21
	BreastscreenNT	21
	Cancer Council NT	22
	Cancer Council Helpline	22
	Cancer Council Australia	23
	CanNET NT	23
	National Breast and Ovarian Cancer Centre	23
	Local Member and Support Groups	24
	For Health Professionals	26
	Medicare Australia Items Available for Cancer Treatment	26
	National Health And Medical Council (NHMRC) Clinical Guidelines	26
7	Glossary and Abbreviations	27

1 Explanation of Patient Pathways

Introduction

Welcome to the **Breast Cancer** Pathway for the Northern Territory.

This pathway booklet aims to assist people with cancer to understand and navigate the journey ahead. It includes information on early detection, initial diagnosis, treatment planning and treatment options.

It is also useful for health professionals to follow the referral and treatment pathways for particular cancers.

Purpose of this Pathway Document

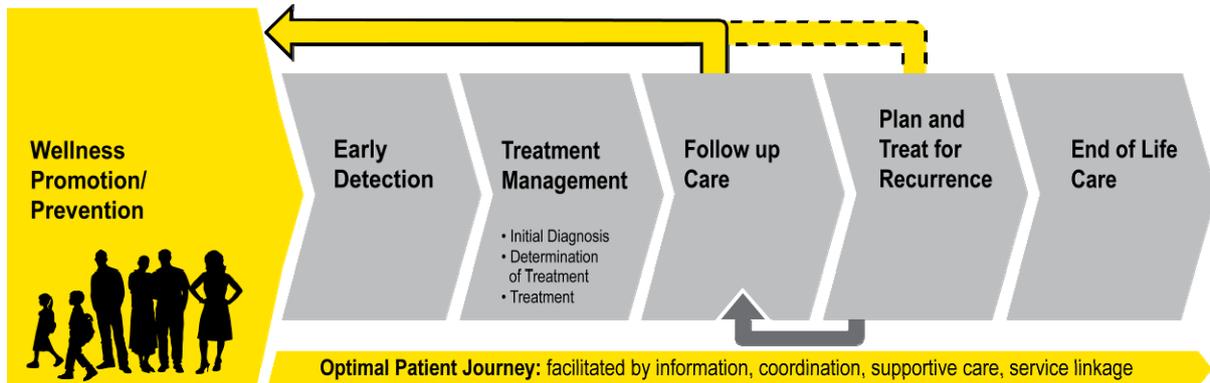
This document will help to guide you on your cancer journey through the public health system in the Northern Territory. You may choose to access the private system or to travel interstate for care, which may change the nature of the pathway you follow.

The pathway describes the current typical cancer service delivery arrangements in the NT. It is not designed to serve as evidence-based clinical guidelines or to recommend areas for service development.

It is designed to inform you of the services and treatments available, and to encourage communication amongst all team members involved in the delivery of cancer services.

The Radiation Oncology Unit at the Alan Walker Cancer Care Centre (AWCCC) in Darwin is able to plan and treat breast cancer patients who require radiotherapy. This will mean that fewer people will need to travel interstate for such services in the future, although some people will still need to do so.

Patient Cancer Care Referral Pathway – The Generic Pathway



Five pathway booklets have been developed for the following tumour streams:

- Trachea/Lung
- Breast
- Prostate
- Bowel
- Head and Neck

Implementation and Principles of Patient Care

The pathway that you follow needs to be tailored to your needs and developed in consultation with your clinician. It will need to reflect the type of cancer that you have and the practicality of your situation. All care is based on the following principles:

- (1) **Patient-centred care:** Involves you and your carers accessing adequate information and being actively involved in the processes for all aspects of your care. Your involvement is critical.
- (2) **Coordinated care:** Throughout the cancer journey, coordinated care involves your local health professional (eg general practitioner, health worker, visiting medical officer, clinical nurse, Aboriginal Health Worker), as well as the treating surgeon and cancer specialist. You and your family should experience coordinated care with smooth and timely transitions from one service to another. Coordination of services may occur through the use of Multidisciplinary Team (MDT) meetings, case conferencing, patient records and sharing of information. Communication amongst health professionals is of vital importance to ensuring a smooth pathway for you. Do not be afraid to ask about this.
- (3) **Quality cancer services:** Cancer services support and participate in planned approaches to quality improvement through a variety of strategies designed to address your needs, service delivery, the collection and analysis of data, and staff knowledge and skills.
- (4) **Psychosocial support:** Quality of life issues are integral to your care. You should be offered access to a range of support services throughout each step of the cancer journey. This includes all services that support you, your families and carers to meet your physical, psychological, social, cultural, information and spiritual needs.

Future Review and Development

It is envisaged that the NT Patient Cancer Care Referral Pathways will be reviewed annually to include new services that significantly impact upon the delivery of cancer services in the NT.

During future reviews, the scope of the pathways may be altered and development of additional tumour streams will occur.

Structure of the Pathways

The pathway for breast cancer documentation is provided at three levels of detail, to reflect the diverse information needs of different readers. These levels are:

- **Level 1: Overview** (Chapter 2): This diagram provides an overview of the typical pathway for patients with breast cancer in the NT public health system. It is intended to summarise the key features of the breast cancer pathway in one easy-to-access location for patients.
- **Level 2: Expanded View** (Chapter 3): This diagram provides an expanded view of the typical pathway for patients with breast cancer in the NT public health system, with additional detail. The information contained in this additional 'view' is consistent with the overview but contains more detail for patients on the type of intervention to expect and where services are available.
- **Level 3: Detailed View** (Chapter 4): This section provides a further level of detailed information on diagnostic processes, treatment options and possible variations in the pathway. It is intended for interested patients and health professionals with a need to inform themselves in undertaking their professional role.

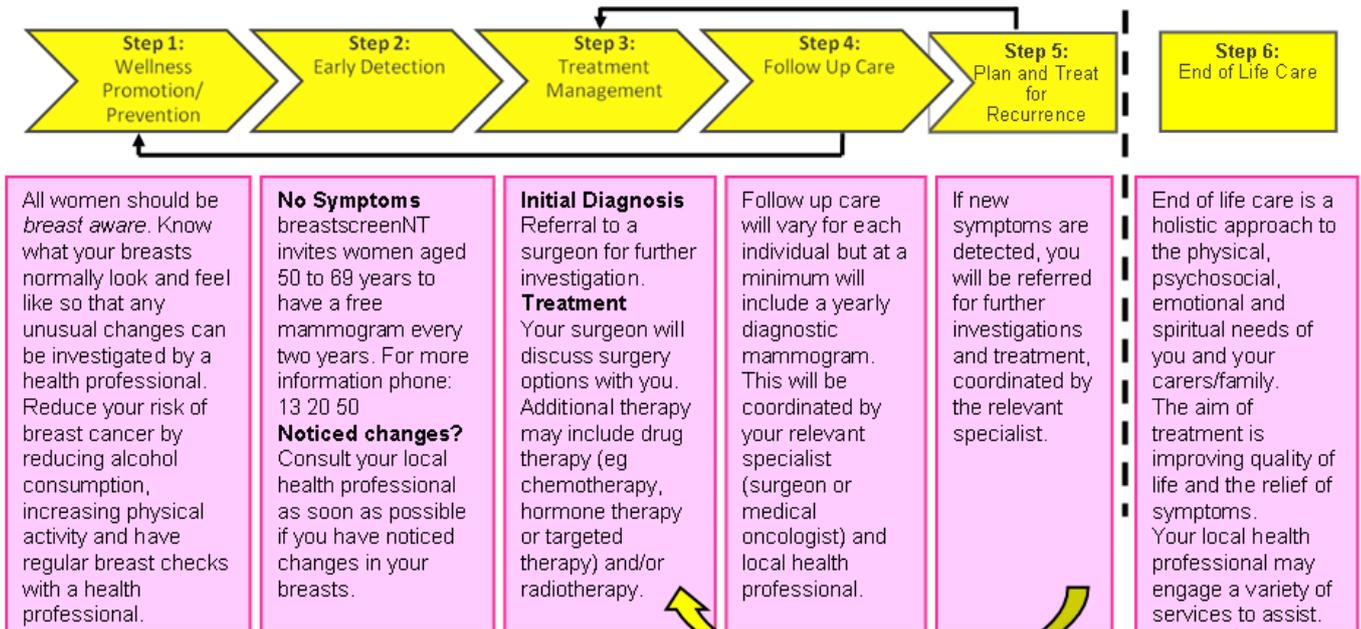
These different views are complemented by extra details on:

- Support services for breast cancer (Chapter 5)
- Other useful sources of information on breast cancer (Chapter 6)
- A glossary of terms (Chapter 7)

2 NT Breast Cancer Patient Referral Pathway – Overview

This diagram provides an **overview** of the typical pathway for people with breast cancer in the NT public health system. It is intended to summarise the key features of the Breast Cancer Patient Referral Pathway in one easy to access location.

Overview of the NT Breast Cancer Patient Referral Pathway, Public Health System



Support Services

Support services are available through the **Cancer Council NT**, which includes the **Breast Care Nurse**.
CanNET NT provide a Directory of Services online at www.health.nt.gov.au
NT Breast Cancer Voice Darwin ph: 0401 111 429
Bosom Buddies Alice Springs ph: (08) 8955 0678
Breast Care Nurse Alice Springs ph: (08) 8953 5920 and Darwin ph: (08) 8927 4035

Other Information

National Breast and Ovarian Cancer Centre www.nbcc.org.au
Breast Cancer Network Australia (BCNA) www.bcna.org.au
Cancer Council NT www.cancerCouncilnt.com.au

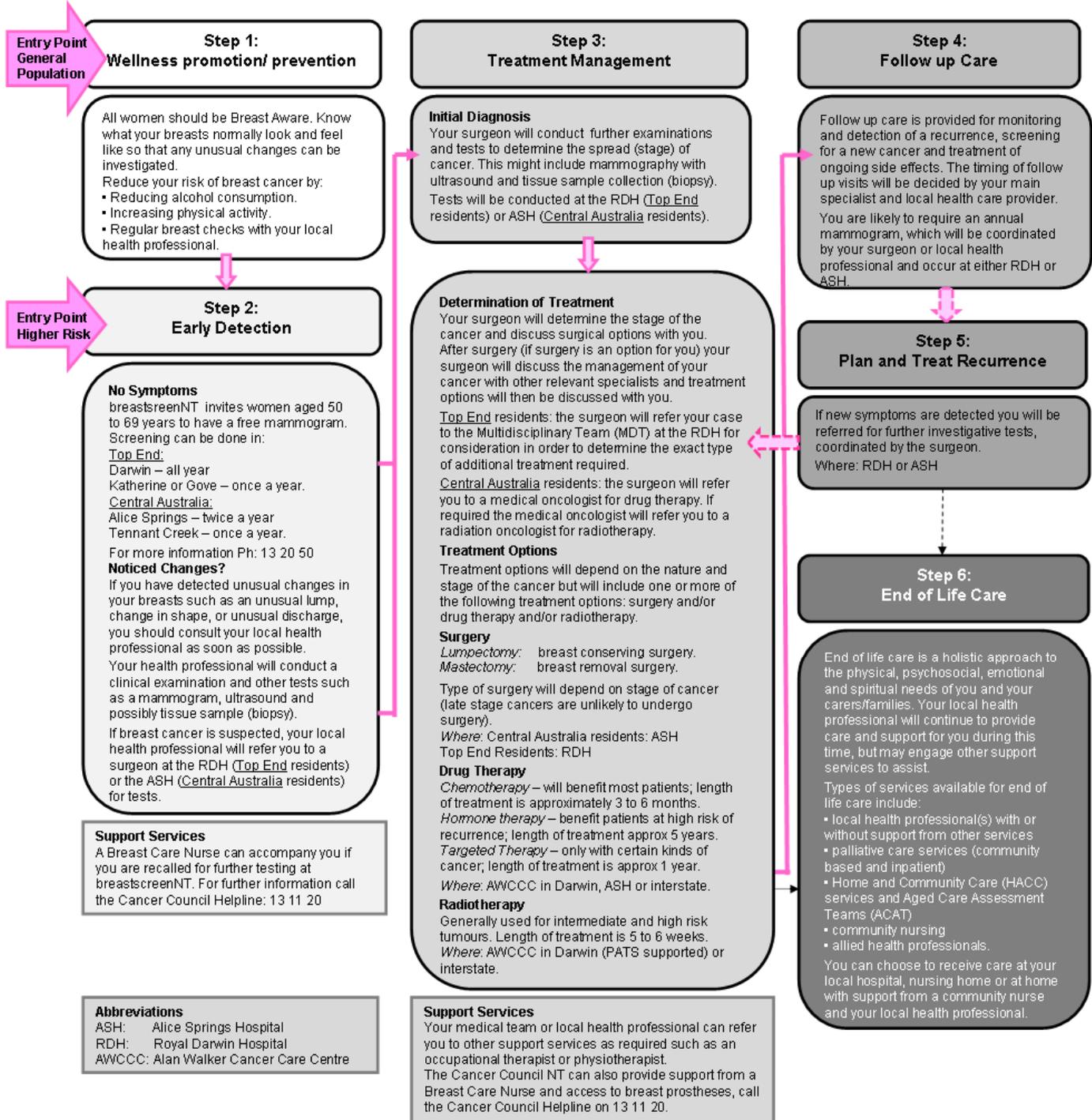
Travel Support

Assistance for travel through the **Patient Assistance Travel Scheme (PATS)**. Contact **Royal Darwin Hospital** (08) 8922 8135 or (08) 8922 8134; **Katherine District Hospital** (08) 8973 9206 or (08) 8973 9213; **Gove District Hospital** (08) 8987 0540; **Alice Springs Hospital** (08) 8951 7848 or (08) 8951 7979; and **Tennant Creek Hospital** (08) 8962 4262.

3 NT Breast Cancer Patient Referral Pathway – Expanded View

The following diagram provides an *expanded view* of the typical pathway for people with breast cancer in the NT public health system, with additional detail. The information contained in this additional ‘view’ is consistent with the overview but contains more detail for patients on the type of intervention to expect and where services are available.

Expanded View of the NT Breast Cancer Patient Referral Pathway, Public Health System



Note: This depicts a typical patient cancer care referral pathway for people with breast cancer.

Other Local Support Services

CanNET website provides updates of cancer services in the NT, and a directory of services (June 2009). www.health.nt.gov.au

Cancer Council NT provides many supports for people diagnosed with cancer including a Breast Care Nurse; breast prostheses; and counselling services via nurse counsellors, face to face or telephone. For more information on supports provided call the Cancer Council Helpline on 13 11 20 or visit the website www.cancercouncilnt.com.au

Allied health professionals that you may wish to be referred to include:

- **Dietitians** for nutritional advice, e.g. strategies to reduce diet related side effects and enhance nutrition and quality of life.
- **Occupational therapists** or **physiotherapists** to help maximise physical capabilities and functional independence and for education and management of lymphoedema.
- **Pastoral care** for support and comfort irrespective of religious affiliation (or otherwise).

Assistance for patient travel can be sought for eligible patients through the **Patient Assistance Travel Scheme (PATS)**. Contact local **Patient Travel Offices:** Royal Darwin Hospital (08) 8922 8135 or (08) 8922 8134; Katherine District Hospital (08) 8973 9206 or (08) 8973 9213; Gove District Hospital (08) 8987 0540; Alice Springs Hospital (08) 8951 7846 or (08) 8951 7979; and Tennant Creek Hospital (08) 8962 4262.

Support groups Darwin: NT Breast Cancer Voice in Darwin (08) 8948 1333 and Dragon's Alreast, The Breast Place ph: 1300 889 566.

Alice Springs: Bosom Buddies in Alice Springs (08) 8955 0678.

4 NT Breast Cancer Patient Referral Pathway – Detailed Description

This chapter provides a **detailed description** of the typical pathway for people with breast cancer in the NT public health system. It provides a further level of information compared to the expanded view and includes details of diagnostic processes, treatment options and possible variations in the pathway. It is also intended for health professionals with a need to inform themselves in undertaking their professional role.

Step 1 - Wellness Promotion / Prevention

All women should be 'breast aware'. Know what your breasts normally look and feel like so that any unusual changes can be investigated.

You can reduce your risk of breast cancer by:

- Reducing alcohol consumption
- Increasing physical activity
- Asking your health care provider to check your breasts regularly

To learn more about individual risk visit the online calculator for breast cancer risk.

Web: www.nbocc.org.au/risk

Other useful information can be found on the Cheeky Check-up website (sponsored by the National Breast and Ovarian Cancer Centre).

Web: www.cheekycheckup.com.au

Step 2 - Early Detection

Pathway for Women with No Symptoms (Asymptomatic)

breastscreenNT invites women aged 50–69 years **without** breast symptoms to have a FREE screening mammogram every two years. The benefit from screening mammography is greatest for women in this age group. Over 70 per cent of breast cancers occur in women over 50 years of age. Screening mammograms can detect up to 90 per cent of breast cancers.

Phone: 132 050 to make an appointment

Web: www.health.nt.gov.au/Womens_Health

breastscreenNT have screening clinics in:

Top End:

- **Darwin** – all year
- **Palmerston** – once per year
- **Katherine** – once per year
- **Gove** – once per year

Central Australia:

- **Alice Springs** – twice per year
- **Tennant Creek** – once per year

For more information on dates and locations, contact breastscreenNT.

If your results do not show abnormalities

breastscreenNT will send your results to you (this can take up to six weeks post screening). If requested, your results can be sent to your local health professional (eg general practitioner, health worker, visiting medical officer, clinic nurse, Aboriginal health worker) too. You will be automatically invited to return for screening every two years, unless advised by your health practitioner.

Note: Women aged 40–49 participating in the program will be sent a re-screen letter every two years. Women over 70 are not sent reminder letters, but are welcome to phone for an appointment.

Note: Not all breast cancers are detected with mammography. If you notice unusual changes in your breasts, consult your GP or health professional even if your last mammogram results were clear.

If your results do show abnormalities

You will be recalled to an Assessment Clinic at breastscreenNT in Darwin (once per month) or Alice Springs (twice per year). This does **not** necessarily mean you have cancer. The medical officer at the Assessment Clinic will conduct a clinical exam and undertake further investigative tests (eg a second mammogram, ultrasound and possible tissue sample) to determine the nature of the abnormality.

If cancer is suspected, breastscreenNT will refer you to a surgeon and provide your health professional with this information.

If you wish, a Breast Cancer Nurse (BCN) can accompany you to the Assessment Clinic at breastscreenNT.

Pathway for Women who have Detected Changes in their Breasts (Symptomatic)

You should consult with your local health professional as soon as possible if you detect unusual changes in your breasts, including:

- Lump or lumpiness in the breast or underarm
- Change of shape or appearance of the breast or nipple
- An area that feels different to the rest of the breast
- Discharge from the nipple
- Unusual pain (not related to normal variation experienced during menstrual cycle)

Note: a small percentage of breast cancer occurs in men.

Your health professional will discuss with you the appropriate tests required and may refer you to Royal Darwin Hospital (RDH) (if you live in the Top End) or the Alice Springs Hospital (ASH) (if you live in Central Australia) for a diagnostic mammogram, ultrasound and/or tissue sample (biopsy).

If breast cancer is suspected based on the results of the tests, your health professional will discuss options with you and refer you to a surgeon. Within the Territory, you will be referred to a general surgeon at Royal Darwin Hospital or Alice Springs Hospital. If you wish to be referred to a surgeon who specialises in breast cancer/breast surgery, you will have to travel interstate.

Note: at the time of printing there were two general surgeons at Royal Darwin Hospital with additional qualifications in breast surgery.

Initial Diagnosis

If breast cancer is suspected, your health professional will discuss options with you and refer you to a surgeon.¹ The surgeon will conduct a clinical examination and advise you of the tests necessary to diagnose the cancer and determine the spread (stage) of the cancer. Tests may include:

- A tissue sample collection (biopsy)
- Diagnostic mammography with an ultrasound

If you live in the Top End, a biopsy can occur at Royal Darwin Hospital.

Visiting surgeons may perform biopsies at the Katherine District Hospital or the Gove District Hospital, however a diagnostic mammography with ultrasound, if required, will occur at Royal Darwin Hospital.

If you live in Central Australia, these tests will occur at Alice Springs Hospital.

¹ If you wish to be referred to a surgeon who specialises in breast cancer/breast surgery, you will have to travel interstate.

Step 3 - Treatment Management

Determination of Treatment

Your surgeon will determine the spread (stage) of the cancer based on the previous tests and examination. In some cases further testing, such as Magnetic Resonance Imaging (MRI) or bone scans may be requested and you may need to travel interstate.

After determining the stage of your cancer and surgical options available, your surgeon will discuss the management of your cancer with other relevant specialists and you.

If you live in the Top End, your surgeon will discuss your case at the cancer Multidisciplinary Team (MDT) meeting based at Royal Darwin Hospital. The MDT comprises a mix of health professionals such as your surgeon, a radiation oncologist and the cancer support nurse. For advice regarding radiotherapy, the radiation oncologist from the AWCCC will be consulted. The Breast Care Nurse (BCN) and your local health professional may also be involved in the MDT discussions.

If you live in Central Australia, your surgeon will discuss your case with the visiting medical oncologist at Alice Springs Hospital. You may have to travel to the AWCCC in Darwin to visit the oncologist if they are not scheduled to return to Alice Springs in a timeframe concurrent with your surgery. The medical oncologist will discuss your case at the AWCCC MDT meeting in conjunction with the radiation oncologist from the AWCCC.

Treatment

Treatment for your cancer will depend on the nature and spread (stage) of the cancer, but will include one or more of the following treatment options:

- Surgery
- Drug therapy
- Radiotherapy

Surgery

Initial treatment is likely to involve surgery to remove the cancer. Surgery will benefit most people diagnosed with breast cancer.

The type of surgery required will depend on the nature and stage of your cancer. Your surgeon will discuss your options with you and your family. Typical surgical options include:

- **Lumpectomy:** breast conserving surgery in which only the tumour and some surrounding tissue are removed. This type of surgery is fairly standard for early stage cancers.
- **Mastectomy:** whole or partial removal of the breast, which may be necessary for late stage cancers. If there is a possibility that the cancer has spread to nearby lymph nodes in the underarm, these may also be removed.

Note: very late stage cancers are unlikely to undergo surgery. In some cases, chemotherapy may be provided before surgery in order to reduce the tumour size to allow a lumpectomy to be performed over a mastectomy, conserving the breast.

If you live in the Top End, this will occur at Royal Darwin Hospital.

If you live in Central Australia, this will occur at Alice Springs Hospital.

After surgery, your surgeon will refer your case for **drug therapy** and/or **radiotherapy**. As appropriate, your surgeon may also refer you to a surgeon with plastic surgery skills for reconstruction options.

Drug Therapy

Drug therapy includes various treatments such as chemotherapy, hormone therapy and targeted therapy.

- **Chemotherapy:** is the use of drugs to kill rapidly dividing cancer cells throughout your body. It is often used after surgery to target any cancer cells that may have spread or been missed. The length of treatment varies significantly depending on the type and stage of the cancer, but most chemotherapy cycles for breast cancer take approximately three to six months.
- **Hormone therapy:** is the use of drugs to reduce the body's production of the hormone oestrogen which is required for growth of the breast cancer cells. In some cases surgery may be used to reduce oestrogen levels (ie removal of the ovaries), but your medical team will discuss hormone therapy options with you. The length of treatment using oestrogen reducing drugs is approximately five years.
- **Targeted therapy:** the use of specialised drugs which target specific breast cancer cells. Your medical team will discuss this with you if it is an option for your cancer type. The length of treatment for targeted therapy is approximately one year.

If you live in the Top End, this will occur at the AWCCC or the Royal Darwin Hospital.

If you live in Central Australia, this will occur at Alice Springs Hospital.

Note: if you have a very advanced cancer or a complex case, you could be sent interstate for treatment. If you are undergoing radiotherapy interstate, you may also undergo chemotherapy there as well.

Radiotherapy

Radiotherapy is the use of high-energy x-rays that target where the cancer is located. The rapidly dividing cancer cells are less able to recover from the damage caused by the radiation (compared to healthy cells) and are therefore destroyed. In breast cancers, radiotherapy is used after surgery to target any remaining cancer cells. People at high risk of secondary tumours or locally advanced disease are also likely to benefit from radiotherapy. The length of treatment is approximately five to six weeks. Radiotherapy is also used to treat breast cancer patients with secondary deposits.

The full spectrum for breast radiotherapy is now available at the AWCCC.

During the treatment of cancer you may require the input of many different types of health professionals. You can support communication between the treatment team by asking them to share your medical information with relevant health professionals.

Shared Electronic Health Record (SEHR)

We recommend the use of the Shared Electronic Health Record (SEHR) as a way of securely storing and sharing important information about your health. This information is collected when you visit participating health care providers such as NT public hospitals, health centres and some GPs.

Your SEHR does not replace the medical record that is held by your health care provider. It is a summary of your medical record that is accessible only by authorised health professionals.

For more information on the eHealth and SEHR programs, please visit www.ehealthnt.nt.gov.au or call Consumer Services on (08) 8924 7013.

Step 4 - Follow up Care

Follow up care will vary for each individual. At a minimum it is likely to include yearly breast screening by diagnostic mammography. Surveillance and/or treatment for long term side effects should cover (as appropriate):

- Menopause
- Bone density
- Fertility
- Associated lymphoedema (breast, arm and trunk)
- Second malignancies
- Heart failure
- Family history / genetic counselling
- Reconstructive surgery options

If you live in the Top End, your follow up will be coordinated and documented by your treating surgeon and local health professional. You will be referred to Royal Darwin Hospital for a diagnostic mammogram as required.

If you live in Central Australia, your follow up will be coordinated and documented by the visiting medical oncologist and your local health professional. You will be referred to Alice Springs Hospital for a diagnostic mammogram as required.

Abnormalities: If your follow up screening identifies abnormalities, your health professional will refer you back to the surgeon for further investigative tests and treatment.

No Symptoms: If you do not show any new symptoms of breast cancer in five years, you will be referred back to breastScreenNT for annual screening (mammogram) and encouraged to follow a healthy lifestyle for wellness promotion and cancer prevention.

Step 5 - Plan and Treat for Recurrence

If new symptoms are detected from your regular follow up care, you will be referred for further investigative tests, coordinated by your surgeon. Investigative tests may include:

- Bone scan x-ray / Computer Tomography (CT) / MRI
- Biochemistry and full blood examination
- Surgical biopsy

You may re-enter the pathway for further treatment if a recurrence is found.

If you live in the Top End, testing will occur at Royal Darwin Hospital.

If you live in Central Australia, testing will occur at Alice Springs Hospital. Interstate travel may be required if an MRI and/or bone scan is required.

Step 6 - End of Life Care

End of life care is a holistic approach to the physical, psychosocial, emotional and spiritual needs of you and your carers and family.

Even though your illness is considered incurable, you may still be treated with surgery, chemotherapy or radiotherapy to control symptoms and to ensure your comfort during this time. The aim of treatment is improving your quality of life and for the relief of symptoms.

Your local health professional will continue to provide care and support for you during this time and may engage other support services to assist.

Referral to services such as Territory Palliative Care (TPC), a team of health professionals who specialise in assisting patients and their families through this last stage of illness, may be made by your medical team and/or local health professional. You or your family or friends may also approach TPC for support, advice or even temporary care.

Types of services available for end of life care include:

- Local health professional(s) with or without support from other services
- Territory Palliative Care services (TPC, community based and inpatient care)
- Community Support Services such as: Home and Community Care (HACC) services and Aged Care Assessment Teams (ACAT)
- Community nursing
- Allied health professionals such as a social worker, dietician, occupational therapist, pastoral care and physiotherapist

If you live in the Top End, public palliative care services are available at:

- home with support from your local health professional with or without support from TPC, community nursing or Home HACC/ACAT
- Palliative Care Hospice located at Royal Darwin Hospital campus (provides palliative care, respite and symptom management)
- medical wards at Royal Darwin Hospital
- Palliative Care room at the Katherine District Hospital
- medical wards at the Gove District Hospital
- nursing homes

If you live in the Central Australia, public palliative care services are available at:

- home with support from your local health professional with or without support from TPC, community nursing or Home HACC/ACAT
- medical wards at Alice Springs Hospital
- medical wards at Tennant Creek Hospital
- nursing homes

Additionally, the Cancer Council NT offers a variety of Cancer **Support Groups** and will recommend a suitable forum for your needs. These groups offer a supportive environment to discuss relevant issues, share experiences and gain strength.

For more information phone the Cancer Council Helpline in Darwin on (08) 8927 4888 or in Alice Springs on (08) 8953 5920.

5 Support Services for Breast Cancer

At different times in the treatment of your cancer, different team members may be the main co-ordinator of your care. They will advise you of other services available and refer you to support services such as those described below.

CanNET NT

The CanNET NT website provides updates on cancer services in the NT, including a directory of cancer specific services.

Phone: (08) 8999 2572

Web: www.health.nt.gov.au

Physical

Lymphoedema

Lymphoedema (swelling of limbs) may be a side effect if surgery has included the removal or damage of the lymph nodes. An occupational therapist or physiotherapist who is specifically trained in the management of lymphoedema can provide education on the prevention and management of lymphoedema, and discuss a personalised treatment program. This may include manual lymphatic drainage, compression bandaging, exercises, skin care and the provision of compression garments if needed.

Treatment can be provided publicly through hospital departments or you can choose to see a private lymphoedema therapist. Talk to your Breast Care Nurse or ring your local hospital if you are concerned about lymphoedema.

Lymphoedema Support Group NT

Meetings are at the Carers NT Meeting Room, 59 Bayview Boulevard, Bayview. All are welcome to come along. Support and advice is also available in the central district of the Northern Territory through the following contacts.

Phone: (08) 8927 4888

Email: lsgnt@ymail.com

Prostheses and Wigs

Contact the Cancer Council NT or talk to the Breast Care Nurse for information on free accessories such as wigs for after treatment or temporary breast prosthesis for post-mastectomy.

For more information phone the Cancer Council Helpline

Phone: 131 120

A Medicare Australia rebate exists for permanent breast prostheses. For information on the rebate, visit the Medicare Australia website:

Web: www.medicareaustralia.gov.au

Symptom Management

Your medical team will offer you symptom management, including pain relief, as required. In some cases you may be referred to palliative care for symptom management, such as pain relief, as palliative care specialise in this type of treatment.

Referral to palliative care for symptom management does not necessarily mean that your case is incurable. Palliative support and advice is available in many areas of the Territory, for more information on services please contact the following areas:

Top End

Building 58 (Menziess Building), Royal Darwin Hospital
PO Box 41326, Casuarina NT 0810
Phone: (08) 8922 6761
Fax: (08) 8922 6775

Central Australia

Flynn Drive Community Care Centre, Flynn Drive
PO Box 721, Alice Springs NT 08721
Phone: (08) 8951 6762
Fax: (08) 8951 6774
Web: www.health.nt.gov.au/Palliative_Care

Psychosocial

Counselling

Counselling can be beneficial for anxiety, depression, issues regarding body image and/or sexuality and fertility issues.

The Cancer Council NT offers counselling services to all clients via Nurse Counsellors. Brief interventions include a single session with a clinical psychologist funded by the Cancer Council NT.

Psychological consults are also available at the Darwin Office of the Cancer Council NT.

In Alice Springs the Cancer Council NT can refer you to a psychology service, but there can be long waiting periods. Face-to-face and/or telephone counselling services can also be arranged.

Phone the Cancer Council Helpline on 131 120

For further counselling, you can ask your local health professional to arrange a Mental Health Plan for you.

Allied Health

You can ask your medical team or local health professional to refer you to allied health services at your local hospital, community health clinic or privately to address specific areas of care.

- **Dieticians** provide information about nutritional needs, develop strategies to reduce diet related side effects and enhance quality of life through nutrition.
- **Occupational therapists** work with you towards your goals. They can suggest different ways of managing symptoms including using equipment so you can do your daily tasks. They can help you achieve the best quality of life and be as safe, independent and comfortable as possible. Some occupational therapists can also assist with the treatment and management of lymphoedema.
- **Pastoral Care** offer support and comfort in times of need, help with problems or simply be a companion, listen and talk without giving unwanted advice or intrude into the life of any person. This is available to you, whether you have any religious affiliation or not.
- **Exercise Physiology** uses exercise for the management and/or prevention of complex medical conditions. The aim of this exercise is to equip you with the skills to maintain physical activity in the long term.
- **Physiotherapists** assist you to maximise your physical capabilities and functional independence. This may include the provision of mobility aids where appropriate. They may also assist in pain management and lymphoedema intervention.
- **Social workers** provide support, counselling and help in organising practical assistance with regards to finance and accommodation.
- **Speech Pathologists** can recommend strategies and exercises to assist with swallowing and speech difficulties that may be the side effects of radiation and/or chemotherapy.

You may be eligible for a Medicare rebate with a private allied health professional if the treatment is part of an Enhanced Primary Care Patient Plan developed by a GP. The rebate is available for a total of no more than five allied health consultations in a year.

If you live in a rural area, the More Allied Health Services Program allows you to access public or private allied health professionals (where available) for free if you are referred by a GP.

Patient Assistance Travel Scheme (PATS)

If travel is required, you may be eligible to access PATS. This Scheme assists NT residents to access a range of essential specialist medical or surgical services where services are not available locally or from a visiting service.

PATS provide assistance with travel and, where applicable, accommodation costs to NT residents who are required to travel more than 200kms to specialist medical treatment. PATS is a contribution scheme and does not cover all travel and accommodation costs.

Visit PATS online for more information or contact your Patient Travel Office at your local hospital:

Web: www.health.nt.gov.au

Phone:	Royal Darwin Hospital	(08) 8922 8135 or (08) 8922 8134
	Katherine Hospital	(08) 8973 9206 or (08) 8973 9213
	Gove District Hospital	(08) 8987 0540
	Alice Springs Hospital	(08) 8951 7846 or (08) 8951 7979
	Tennant Creek Hospital	(08) 8962 4262

6

Other Useful Sources of Information on Breast Cancer

The following websites and contact details have been provided for your information. The authors take no responsibility for the content of these websites.

For the General Public

Breast Cancer Network Australia (BCNA)

Free call: 1800 500 258

Phone: (03) 9805 2500

Fax: (03) 9805 2599

Web: www.bcna.org.au

E-mail: beacon@bcna.org.au

Address: 293 Camberwell Rd, Camberwell, Victoria, Australia 3124.

The website contains information on:

- Newly diagnosed breast cancer, including:
 - a 'My Journey' pack
 - a 'Hopes and Hurdles' pack
 - information and tips for people living in rural and remote areas
 - information for young women
 - information for men
- Secondary breast cancer
- State/territory specific information including links to member and support groups.

breastscreenNT

breastscreenNT provides free breast x-rays for the early detection of breast cancer in women aged 50–69 years. These detect most breast cancers, including those too small to be felt.

Phone: 13 20 50

Cancer Council NT

The Cancer Council NT is a non-government, charitable, community based organisation committed to raising funds for the purpose of reducing the impact of cancer. It achieves this by providing information and support for people affected by cancer. The Cancer Council NT is a member of The Cancer Council Australia. The website contains information sheets on various cancer types including screening processes and risk factors.

Web: www.cancercouncilnt.com.au

Email: admin@cancernt.org.au

Darwin

Casi House,
Unit 2 & 3/25 Vanderlin Drive, Wanguri

PO Box 42719
Casuarina NT 0811

Telephone: (08) 8927 4888
Fax: (08) 8927 4990

Alice Springs

Shop 3, Ground Floor
Anangu House, Bath Street

PO Box 9215
Alice Springs NT 0871

Telephone: (08) 8953 5920
Fax: (08) 8952 9189

Cancer Council Helpline

By calling the Cancer Council Helpline you can speak to caring and experienced people who understand what you need to know about your cancer and are familiar with resources available in the Northern Territory. The expertly trained nurse/health counsellors provide confidential information and support for people with cancer and their families and friends about:

- How to prevent cancer or detect it early
- Different types of cancer
- Diagnostic tests and cancer treatments
- Services available to people with cancer
- Emotional aspects of cancer

The Cancer Council Helpline does not provide medical advice or recommend a course of action, but the trained nurses and health counsellors can provide information to clarify medical terms, procedures and treatments.

The Cancer Council facilitates support groups for people at different stages of the cancer journey, offering a supportive environment to discuss relevant issues with people who can offer support, advice and hope. Please contact the Cancer Council to discuss which group would meet your needs.

Phone: 131 120

Local call cost from anywhere in Australia

Open: 9.00 am – 5.00 pm, Monday to Friday

Cancer Council Australia

Cancer Council Australia is Australia's peak national non-government cancer control organisation and provides advice to the Australian Government and other bodies on practices and policies to help prevent, detect and treat cancer as well as advocating for the rights of cancer patients for best treatment and supportive care. The vision of the Cancer Council Australia is to *minimise the threat of cancer to Australians, through successful prevention, best treatment and support.*

The website contains fact sheets on various cancer types including lifestyle factors, early detection and diagnosis.

Web: www.cancer.org.au

CanNET NT

The aim of CanNET NT is to develop a network of cancer service providers to deliver streamlined cancer services across the Northern Territory. The project focuses on enhancing access to quality cancer services for all Territorians. Visit the website for updates on cancer services in the NT, including a directory of cancer specific services, patient pathway booklets in five tumour streams and Indigenous resources in five Indigenous languages.

Web: www.health.nt.gov.au

National Breast and Ovarian Cancer Centre

Australia's premier organisation for providing accurate information to patients and treating professionals.

Website contains information on:

- Available resources including the 'What every woman should know about breast cancer DVD'
- Breast Health:
 - Early Detection
 - Risk factors
 - Diagnosis
 - Treatment options
- Clinical best practice

Phone: (02) 9357 9400

Fax: (02) 9357 9477

Web: www.nboocc.org.au

Email: director@nboocc.org.au

Address: Locked Bag 3, Strawberry Hills, NSW 2012.

Local Member and Support Groups

National

Look Good Feel Better (LGFB)

The LGFB Program is a Cosmetic Industry Community Initiative for women, men and teenagers undergoing cancer treatments. The program offers support and education on managing appearance related side effects of cancer treatments, ultimately helping with self image – and it is fun!

Contact LGFB for details and dates of program workshops in Alice Springs and Darwin, or to register for a workshop.

Phone: 1800 650 960

Web: www.lgfb.org.au

Darwin

NT Breast Cancer Voice

NT Breast Cancer Voice is an independent and self-funded breast cancer advocacy group that aims to improve services and conditions for all Territorians touched by breast cancer. While the majority of members have had a diagnosis of breast cancer, the organisation is also open to others who are concerned for those diagnosed.

Phone: (08) 8948 1333

Dragons Abreast NT

Dragons Abreast NT is part of the National Dragons Abreast Australia program.

Dragons Abreast Australia has over 50 member groups across Australia and provides positive support, based around the activity of dragon boating for women surviving breast cancer and their families and friends.

They have recently opened a centre in Darwin, The Breast Place, which acts as a drop in centre for women with (or surviving post) breast cancer.

Phone: 1300 889 566

Web: www.dragonsabreast.com.au/NT

Email: office@dragonsabreast.com.au

Address: 11/41 Sadgroves Crescent, Winnellie

The Breast Place

The Breast Place, the national headquarters for Dragons Abreast Australia, provides a one-stop, drop-in centre for information, informal support and activities on breast cancer and related patient advocacy.

Staffed on a volunteer basis by women who have personally experienced breast cancer diagnosis, The Breast Place is home to all Darwin-based breast cancer patient groups. It offers a supportive and relaxed atmosphere to get information or just have a chat with others who have been on the same journey.

Phone: 1300 889 566

Address: 11/41 Sadgroves Crescent, Winellie

Open: 10.00 am – 3.00 pm, Monday to Friday

YWCA Encore

YWCA Encore is a free eight week program designed for women who have experienced breast cancer at any time in their life. It incorporates gentle land and pool based exercises, relaxation techniques, information sessions by guest speakers and support in a safe, fun and therapeutic way.

Phone: (08) 8981 8323

Web: www.ywcaencore.org.au

Alice Springs

Bosom Buddies

Bosom Buddies is an independent breast cancer support and advocacy group based in Alice Springs. It is largely comprised of women who have experienced breast cancer themselves. Monthly informal meetings are held at the Royal Flying Doctors Service (RFDS) Café to provide an opportunity to offer information, support and hope in a relaxed and friendly atmosphere.

Bosom Buddies maintain linkages with many stakeholders in the cancer care spectrum and is active in advocacy to improve health services and conditions for consumers – particularly in the Central Australia Region.

Phone: (08) 8955 0678

Wig Library

Located at the Alice Springs Memorial Club, the Wig Library provides a private service for the provision of Wigs to cancer patients. Home visits are available.

Contact us to arrange a volunteer hairdresser to find the perfect look for you.

Phone: (08) 8952 2508 or (08) 8952 1124 or mobile 0417 813 461

For Health Professionals

Medicare Australia items available for cancer treatment

A summary of Medicare Australia Items available for cancer treatment is accessible online.

Web: www.canceraustralia.gov.au

National Health and Medical Council (NHMRC) Clinical Guidelines

Web: www.nhmrc.gov.au

(1) **Clinical Practice Guidelines for the Management of Early Breast Cancer – 2nd Edition, 2001.**

Prepared by the iSource National Breast Cancer Centre

Reference number CP74

‘This document is a general guide to appropriate practice, to be followed only subject to the clinician’s judgement and the woman’s preference in each individual case.

The guidelines are designed to provide information to assist decision-making and are based on the best information available at the time of publication.

This is the second edition of the Clinical Practice Guidelines for the Management of Early Breast Cancer and replaces the first edition released in 1995. It is planned to review this Clinical Practice Guideline by 2006.’

(2) **Clinical Practice Guidelines for the Management of Advanced Breast Cancer – 2nd Edition, 2001.**

Prepared by the iSource National Breast Cancer Centre Advanced Breast Cancer Working Group

Reference number CP76

(3) **Clinical Practice Guidelines on Familial Aspects of Cancer, 1999.**

Reference number CP67

7

Glossary and Abbreviations

Term	Abbreviation	Meaning
Alice Springs Hospital	ASH	
Biopsy		Removal of a small amount of tissue from part of the body. Can be non-surgical eg using a needle to extract the tissue, usually for diagnostic purposes only; or surgical, where larger amounts of tissue are removed for treatment and diagnostic purposes.
Chemotherapy		Use of anti-cancer drugs to stop the growth of cancer, either by killing the cancer cells or by stopping them from dividing. Chemotherapy drugs enter the bloodstream and can reach cancer cells throughout the body. The way the chemotherapy is given depends on the type and stage of the cancer being treated. Chemotherapy is used to kill cancer cells and prevent recurrence.
Computer Tomography	CT	A diagnostic technique used to produce cross-sectional images of the body. Very useful in the head, chest and abdomen regions.
Drug therapy		Use of drugs for the treatment of cancer. In reference to breast cancer treatment, includes chemotherapy, hormone therapy and targeted therapy.
Hormone therapy		Use of drugs to reduce the body's production of the hormone oestrogen, which is required for growth of the breast cancer cells. In some cases surgery may be used to reduce oestrogen levels (ie removal of the ovaries).

Term	Abbreviation	Meaning
Local health professional		For the purpose of this document, your local health professional has been defined as the health professional with whom you seek initial medical advice such as a general practitioner, health worker, visiting medical officer, clinic nurse or Aboriginal Health Worker.
Lymphoedema		Secondary lymphoedema can occur after treatment for cancer, when lymph nodes are removed from the body by surgery or damaged by radiotherapy. This can stop the lymph fluid from flowing freely through the lymphatic system and can cause a build up of fluid in some parts of the body. Lymphoedema may affect the arm after treatment of lymph nodes in the armpit, or swelling may occur in the leg if nodes in the groin are removed. Facial swelling may also occur if local nodes are affected.
Mammogram/Mammography		X-ray imaging of the female breast to visualise fine details of the breast tissue.
Magnetic Resonance Imaging	MRI	Diagnostic technique that uses magnetic signals to produce images of tissue in the body. Like all imaging techniques, MRI creates images by the differences between types of tissues.
Multi-disciplinary Team	MDT	Team of health professionals from various disciplines including clinical staff, eg surgeon and medical oncologist; and allied health professionals eg physiotherapists. The aim of MDT's is to provide best practice, patient centred and holistic treatment planning.
Palliative Care		Palliative care improves the quality of life of patients who face a life-threatening illness, by providing pain and symptom relief, spiritual and psychosocial support from diagnosis to the end of life, and bereavement. <i>Definition from the World Health Organisation:</i> www.who.int/cancer/palliative/en/

Term	Abbreviation	Meaning
Radiotherapy		Use of a high-energy x-ray targeted at specific areas of the body where the cancer is located (sometime referred to as <i>localised therapy</i>). The rapidly dividing cancer cells are less able to recover from the damage caused by the radiation (compared to healthy cells) and are therefore destroyed.
Royal Darwin Hospital	RDH	
Staging of cancer		A method of classifying the severity and spread of the cancer based on size of the tumour and spread of the cancer (if any). Accurate staging of a cancer is important to determine appropriate treatment and prognosis.
Targeted therapy		Use of specialised drugs which target specific types of breast cancer cells. This kind of therapy is only of use in specific types of breast cancer.

CanNET is a Cancer Australia initiative. CanNET NT is jointly funded by the Australian Government and the Department of Health and Families.