Yorkshire Cancer Community

July 2026 Edition

VOICE

The voice of those affected by cancer in Yorkshire and The Humber

www.yorkshirecancercommunity.co.uk

Welcome to the July edition of the VOICE Newsletter

In this month's edition, we say farewell to our chairman Dr Stewart Manning, who has decided to take a well-earned retirement. We are very sorry to see Stewart go and are extremely grateful for the outstanding contribution he has made to YCC over the last five years. We wish Stewart a very long and happy retirement.

Also this month, we feature Naseem's story of how a kidney cancer diagnosis changed her whole outlook on life, and Chris's experience following his shock prostate cancer diagnosis. We bring you exciting news from the Celebrating Innovation Through Collaboration conference, hosted by the West Yorkshire & Harrogate Cancer Alliance, and what this means for the future of YCC, plus Dr Shaunna Burke's record-breaking feat of becoming the first woman to reach the summit of Mount Everest with stage 4 cancer.

Best wishes
Sarah, Clare and Jess

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Your Stories

Dr Stewart Manning retires as chair

Dr Stewart Manning has been a significant part of Yorkshire Cancer Community's journey over many years, but has decided the time is right to retire, effective from 1 June 2026.

Stewart joined the board of trustees in July 2021 and became our chairman soon after that. During his time with us Stewart has thrown himself into his volunteering role wholeheartedly, and with great enthusiasm, giving countless Cancer SMART talks and running information stalls. His warm and friendly nature, coupled with his life experiences as a retired GP, a carer for his Mum, who had a cancer diagnosis, and a cancer diagnosis himself, meant that Stewart had seen cancer care from all sides. Through his experiences he brought valuable insight and understanding of the challenges facing people affected by cancer and the services that support them

He was a passionate advocate for patient involvement and a confident speaker who was able to engage audiences and communicate complex issues in an accessible way. His commitment helped strengthen relationships across the cancer community and contributed to the growth and development of the charity.

As Stewart steps away from Yorkshire Cancer Community, we would like to thank him for his years of service and dedication. His contribution forms part of the charity's history, and one of the best ways we can honour that legacy is by continuing to build and grow Yorkshire Cancer Community so that it remains a strong voice for people affected by cancer for many years to come.

Here's what some of our team thought of Stewart.

What always struck me about Stewart was his ability to connect with people. Whenever we attended an event together, there always seemed to be someone he already knew, and if there wasn't, he was perfectly happy to strike up a conversation with someone new. He had a natural ability to find common ground and make people feel at ease, which helped him build relationships and open doors for Yorkshire Cancer Community across the cancer community.

Stephen Halstead, trustee & treasurer

Stewart is one of the kindest, most generous and thoughtful people, I have had the pleasure to meet.

He is genuinely interested in people, and in passing on his knowledge, and in our case, this made him the ideal representative to pass on the Cancer SMART message. He was so passionate, he single-handedly doubled our engagement numbers in Leeds.
I have known Stewart join online meetings or answer patient inquiries while on holiday in the States.
I feel so privileged to have had Stewart's support and friendship while I worked at YCC.

Jill Long, retired manager

Stewart is engaging, has a wonderful kind heart and a fantastic sense of fun. Although I have only known him a short time, his passion to improve the lives of others shone through from the first second I met him.

Sarah Mitchell, manager

Stewart with all his knowledge has inspired me to become more engaging about cancer and helped me improve my skills.

Michael Barton, trustee

Stewart is incredibly thoughtful and kind. He is generous to a fault and will always go the extra mile to offer help and advice to anyone who needs it. He truly is the loveliest person, and I will miss him greatly.

Clare Lockwood, Finance & Admin Officer

Thank you for your dedication, your friendship and the positive impact you have had on our community. While you may be retiring, the difference you have made will continue for many years to come.

Your mantra was *"You cannot change the world, but you can change the world for one person"*. You lived those words every day. Through your kindness, humour, compassion and unwavering support, you changed the world for countless people.

Linda Walker, volunteer and fundraiser

Stewart has been a wonderful Chair of YCC and a generous supporter of so many people across the community. When I first became involved, he kindly offered to mentor me, and I have always appreciated his guidance, wisdom and encouragement. Stewart is one of those people you know you can always turn to for advice or support, and I wish him all the very best for the next chapter.

Jess Hart, Project Lead

We will be appointing a new chairperson at our AGM on 2 July.

Naseem's story

I received my kidney cancer diagnosis in February 2025.

My cancer was discovered by chance, after I had experienced months of different symptoms. Nothing had ever been picked up on blood tests, but when my feet started to swell I was sent for an MRI scan. This revealed I had kidney cancer and my cancer journey began.

When I received my diagnosis, I was extremely shocked and very upset. I just couldn't believe it and thought the doctors must have made a mistake. I felt as though my whole world had been turned upside down, and I just ran out of the hospital in a state of shock.

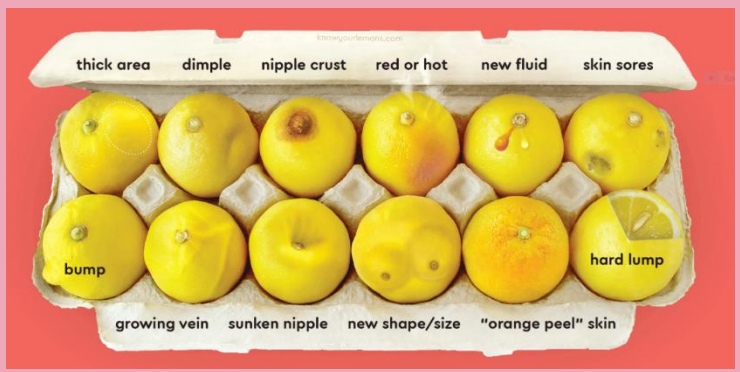
The following month I had an operation to remove the cancer. The operation was successful and thankfully no other treatment was needed, although I will need to go for check ups for the next ten years, and will be monitored closely just in case it comes back.

My cancer diagnosis has had a really profound effect on me. Before my diagnosis I didn't understand the physical and emotional effects of having cancer. For me I felt like I had to start from scratch and rebuild my life again. It has given me a new outlook on life, and I now realise the importance of making each day count. I am determined to not take life for granted, but to live my life to the full. I hope by sharing my story it will help others.

Thank you to the Rotary Club of Horbury and Ossett Phoenix

We are delighted to have received a donation from the Rotary Club of Horbury and Ossett Phoenix, as part of their Spring Bids 2026. Here's Stephen collecting our certificate.

This donation has allowed us to purchase some "Know Your Lemons" cards which are a fantastic resource to highlight the different signs and symptoms of breast cancer – it's not just lumps! These handy credit card-sized handouts fit nicely in your pocket or purse to keep and refer back to.



Chris's story

Your risk of prostate cancer increases with age, so if you're over 50 and have a prostate, speak to your GP about having a PSA test. Your risk is higher still if you're Black or have a family history of prostate cancer (father, brother, uncle, grandfather), or your mother or sister has had breast cancer.

Prostate cancer doesn't have any symptoms in the early stages, but catching cancer early can significantly improve your overall outcome.

Here we share Chris's story, which highlights the importance of getting tested, even if you don't have symptoms.

Hi, my name is Chris and I am 70.

This is a brief insight into my cancer journey.

My story starts last year in May 2025.

We have a local Lions Charity Organisation that do some amazing work raising funds for good causes around our Town and surrounding villages etc. One of their events is a prostate testing day, carried out by the Graham Fulford Charitable Trust; the Lions fund 200 places for men within the area.

I have been aware of the event for a number of years, but thought, having no symptoms, I would be OK. My wife "suggested" that I should go and get tested as I had nothing to lose……!

So, the appointment was booked for Thursday and bloods were taken; it was all over within a few minutes. I was told to expect my results within 2 weeks. I received a letter the following week with my result; it was high. OK, so what now?

I was advised in the letter to make an appointment to see my GP, which I did for the following week. My appointment was with an advanced nurse practitioner. She apologised and said that she wasn't trained to examine me, but she gave me some words of advice that stuck with me.

Firstly……do not panic

Secondly……do not Google anything

I adhered to that advice.

I saw a GP the following week; he did a rectal examination and then made an urgent referral to the Urology dept at St James's in Leeds.

An appointment was made for an MRI, and I was advised that if the conclusions were not satisfactory, I would probably need a biopsy. I did indeed need the biopsy. It is a procedure that is probably best described as "uncomfortable" but not painful. This is where the advice I'd been given came into play. As the doctor was taking the biopsies, I was talking to the nurse and mentioned the advice I'd been given. The doctor told me that he could tell I hadn't googled because of how relaxed I was.

Biopsy done, I was given an appointment to see a consultant within a few weeks. It wasn't good news, I was informed that the bad news was that I prostate cancer, but the good news was that there was no evidence of any spread within my pelvic area. He talked me through the potential treatments…etc etc and said that I should return after talking everything through with my wife, and speak to a consultant where we could make a decision going forward.

My wife has been through cancer treatment on 4 occasions, so we had the opportunity to discuss everything rationally.

I returned to see a consultant surgeon having already made my decision….the options available were a radical prostatectomy, chemotherapy and a trial which was available, but my gleason 3 score was too high for it.

I opted for radical prostatectomy (robotic surgery).

My surgery was carried out in October 2025.

I had one night in hospital and was discharged the following day with a catheter fitted.

I have to say my recovery was a lot better than I had expected. I had my catheter removed after 10 days, and any leakage cleared up within a few weeks. I started walking and gradually built up my distance and speed over the next 6 - 10 weeks.

I returned to see my surgeon in January 2026.

He informed me that the cancer was more "significant" than expected, so the decision to have surgery was the right one. But, more importantly, had the cancer not been picked up through the blood test, then it could have been a very different story. So, post-surgery, life is good and I'm getting on with things. I have a PSA blood test every 3 months for the next 2 years as part of the ongoing checks.

Being patient with the recovery is paramount. It does affect your "personal" life but being open and honest with your partner works brilliantly.

Stay positive and talk to the right people.

Receiving a cancer diagnosis is devastating, but there is a pathway and staying mentally focused is a massive help.

Take care people…..

PROSTATE CANCER UK

Are YOU at higher risk of prostate cancer?

Use the Risk Checker and answer three simple questions to find out more

Visit https://prostatecanceruk.org/risk-checker

Celebrating Innovation Through Collaboration

On 2 June we were proud to be part of the Celebrating Innovation Through Collaboration conference hosted by the West Yorkshire & Harrogate Cancer Alliance. Chaired by TV presenter Christine Talbot and featuring contributions from Managing Director Jason Pawluk, Clinical Director Dr Helena Rolfe, Andrew Prudames, Deputy Director of Delivery in the NHS England Cancer Programme, and Cheryl Tackie, Chair of the National Patient Partner Voice Forum, the event brought together people from across the cancer community to explore the future of cancer care in West Yorkshire and Harrogate.

A recurring theme throughout the day was the importance of collaboration and the value of lived experience in shaping services, improving outcomes and ensuring that the ambitions of the National Cancer Plan remain relevant to the people they are intended to serve. The conference provided an opportunity to celebrate progress already made, showcase innovation across the region, and consider how organisations can work together to deliver meaningful improvements for patients, families and communities.

During the event, there were several key speakers, a Q&A and breakout sessions covering a wide range of topics, culminating in an awards ceremony at the end, with all the awards focusing on patient-centred care. The final award was the Paul Vose Trophy, which was donated by Dr Stewart Manning and presented to our very own Stephen Halstead in recognition of his excellent contribution to developing the role and focus of YCC over the past year. The award was created in Paul's name as a fitting legacy as he did a great deal of work in improving cancer care and held a number of patient advocacy positions, despite his own ongoing health issues following a diagnosis of head and neck cancer in 2006. Paul was one of the founding members of YCC, as well as being involved with his local NHS trust at Mid Yorkshire, his GP's surgery Patient Participation Group (PPG), Macmillan both locally and nationally, the Cancer Alliance patient panel and as a lay board member, and also as a member of the NHS England Patient and Public voice national cancer group. He sadly passed away in May 2025, and his wife Jayne presented the trophy in his honour.

It was truly inspiring to see the incredible work being done behind the scenes to improve cancer care in our region. The aim of the event was to bring people together to transform cancer care and improve outcomes for all.

The focus of the National Cancer Plan:-

1. **From late diagnosis → earlier detection**
2. **From treatment focus → prevention + treatment**
3. **From system-led → more patient control (especially digitally)**
4. **From unequal access → targeted action on inequalities**
5. **From fragmented services → more coordinated, accountable systems**

How Yorkshire Cancer Community will help to deliver the National Cancer Plan

Focus on **prevention** not just treatment – 40% of cancers are preventable

Taking stronger action on risk factors including: -

- **Smoking**
- **Poor diet and obesity**
- **Alcohol**
- **UV exposure**

Why this matters: -

- **It reduces the number of people getting cancer in the first place**
- **It helps manage long-term demand on the NHS**
- **It is seen as essential to improving outcomes for future generations**

There is also a clear link to **inequality**—these risk factors are more common in poorer communities.

Using our resources including our website and Cancer SMART program, we will continue to raise awareness about the benefits from making small lifestyle changes to make a big difference.

Tackling inequalities – cancer outcomes are worse for certain groups.

Key groups that require focus: -

- **People in more deprived areas**
- **Some ethnic groups**
- **Disabled people**
- **LGBT+ communities**

People in these groups are: -

- **More likely to be diagnosed late**
- **Less likely to access screening**
- **Less likely to receive the best care**

We are aiming to focus our outreach to these specific groups, with a more targeted approach to our Cancer SMART program, and the introduction of Cancer SMART hubs. We will help improve awareness and health literacy to encourage engagement with screening, recognising signs and symptoms of cancer, and understanding the risk factors. We aim to take the information to the groups in settings where they are comfortable, to build trust.

Collaboration - We aim to collaborate closely with other groups and charities who work within cancer care and prevention, and within the target communities, to improve the success of the National Cancer Plan.

Dr Shaunna Burke's inspirational Mount Everest climb

Dr Shaunna Burke has stage 4 breast cancer, but she doesn't let that hold her back. In May of this year, she climbed Mount Everest for the second time, having climbed the world's highest mountain 21 years ago in 2005. This time was different though as she became the first woman to reach the summit of Mount Everest with a stage four cancer diagnosis.

Dr Burke, Associate Professor in Exercise and Health Psychology at the University of Leeds is researching how exercise can be used in cancer treatment to help people living with cancer. During an interview from base camp, she said: "This isn't just about reaching the summit. It's also about research and fundraising for Macmillan and showing what is possible, even whilst living with incurable cancer."

Dr Burke set a fundraising target of £50,000 for Macmillan to give back to the charity which has supported her throughout her treatment.

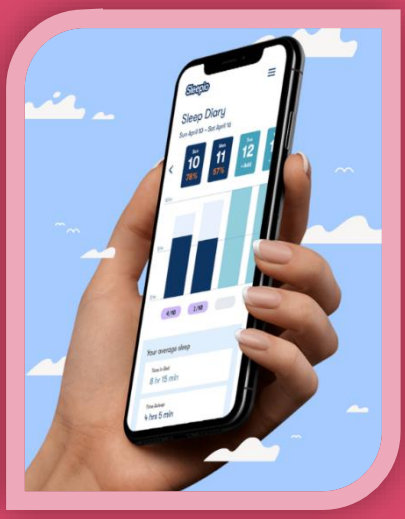
She said: "I wanted to use my climb as a platform to raise awareness of living with stage four cancer and to highlight the incredible work that Macmillan as a charity does right across the country."

"At the moment I've raised over £30,000, so I'm hoping to continue to raise money to give back to a charity that's really helped me."

"When the mountain feels too high, remember: you are stronger than you think."

You can donate to Dr Burke's fundraiser here https://givestar.io/gs/dying-to-climb-shaunna-burkes-return-to-everest

Insomnia and Cancer



Finding it difficult to sleep when you have cancer can be a common problem, you are not alone.

It could be a side effect from treatment, caused by anxiety and worry about your diagnosis or how you will cope, or you may just be too tired to sleep. Whatever the cause, Macmillan have lots of information to help you, from advice on mindfulness and relaxation techniques, dealing with negative thoughts and coping with fatigue. They also offer access to the Sleepio app, which is a six-week clinically proven programme used to treat insomnia, available free when booked through Macmillan.

Visit Macmillan **HERE** to find out more. Find out more about the Sleepio app **HERE**.

News

Obesity linked to the worrying rise of cancer in younger people

Obesity is an important driver of rising cancer rates among the under-50s, a major new study suggests.

While it does not explain the whole story and more evidence is needed, scientists said they believed being overweight or obese plays a role, possibly due to increased levels of insulin and inflammation.

Researchers have become increasingly concerned in recent years about trends showing rising cancer rates in young adults, such as bowel and ovarian cancer. In 2023, around 31,000 cancers were diagnosed in people aged 20 to 49 in England – roughly one in 1,000 people. In contrast, far more (244,000) cases were diagnosed in those aged 50 to 79 – roughly one in every 100. Of the younger group, breast cancer was most common (8,500 cases), while bowel cancer accounted for 3,000 cases and melanoma skin cancer 2,800.

In the new study, experts at the Institute of Cancer Research, London (ICR) and Imperial College London, found that while rates of several cancers have increased in younger adults over the past two decades, most known risk factors for these cancers – such as smoking, drinking alcohol, red or processed meats, low fibre intake and lack of exercise – were stable or declining in the run up to diagnosis. This means these factors are unlikely to substantially explain the increase in cancer cases, they suggested. In contrast, overweight and obesity, which have increased steadily since 1995, could be key factors in the rise of cases, the researchers found. You can read more about this at https://www.independent.co.uk/news/health/cancer-bmi-institute-of-cancer-research-england-london-b2966918.html

King Charles visits York Hospital

People living with cancer say a York centre set up to support them has been a lifeline. King Charles was at York Hospital recently to tour the Sir Robert Ogden Macmillan Centre, which is expanding to provide better, fairer cancer care for everyone.

The King, royal patron of Macmillan Cancer Support, met people for whom the centre had been a lifeline during treatment and heard about their roles in shaping the new facility.

He greeted Macmillan health professionals and cancer nurse specialists, who explained how the £2.4m redevelopment would support thousands of people living with cancer in the region each year.

Advanced radiotherapy for prostate cancer to cut sessions from 20 to 5

Thousands of men in England who have prostate cancer will be offered high-powered precision radiotherapy that will slash the number of treatment sessions they typically need from twenty to just five.

Senior doctors said the technique – called SABR (stereotactic ablative radiotherapy) - would target the disease more effectively than standard radiotherapy and help reduce side-effects.
The treatment is already offered to some patients with other types of cancer, including lung and brain.

This is the first time it will be offered to low- and intermediate-risk prostate cancer patients outside of trials.

Of the 55,000 men diagnosed with prostate cancer each year, around 17,500 are deemed low or intermediate risk. Modelling suggests a fifth of those - around 3,500 - are likely to take up the option of this form of radiotherapy. That is largely because some with low-risk prostate cancer opt instead for active monitoring, rather than immediate treatment, since these cancers are very slow growing and may not cause harm.

NHS England said it expected all 48 radiotherapy centres around the country to start offering the treatment "within weeks".

National clinical director for cancer Prof Peter Johnson said while the move would not benefit all prostate cancer patients, it was an important step.

"This technology lets us focus a powerful and precise beam of radiotherapy directly on to the cancer, limiting the damage to healthy cells," he said. "And the fact it can be delivered in 15 fewer doses will help men get back to living their lives far more quickly."

Amy Rylance, of Prostate Cancer UK, said: "It's wonderful news that thousands of men in England will now have access to this revolutionary targeted radiotherapy. It will massively reduce the burden that cancer places on them, and their loved ones."

The charity is hopeful in the future the treatment will become available to even more prostate cancer patients. Trials are already under way to see if the precision radiotherapy can be used on high-risk prostate cancer patients.

Macmillan's New Training Offer

Macmillan now offers free cancer training and membership to non-cancer specialists and the wider NHS workforce

Macmillan Cancer Support has announced a major expansion of its free, expert-led cancer training programme, making it available for the first time to thousands of health and care professionals working outside of cancer specialist roles.

The new **Macmillan Affiliate Membership** is for all health and social care professionals who interact with or support people with cancer as part of their role. You don't have to work in a cancer-specific role.
The move reflects both the growing number of people living longer with and beyond cancer in the UK with complex, ongoing needs, as well as the reality that cancer can impact every part of your life, meaning care and support needs to come from a wider range of professionals.

It's free and simple to join – to find out more and sign up, visit https://membership.macmillan.org.uk/

What have we been up to?

Northern Race Equality Conference – 15 June

Sarah joined the Northern Race Equality Conference to discover more about health inequalities from those who directly experience them. She hosted a stall and helped raise cancer awareness through Cancer SMART. She also chatted to people about our work which puts lived experience front and centre.

Cancer might not be fair, but cancer care should be.

Cancer SMART, St Mary's Community Centre – 9 June

Jess hosted a Cancer SMART information stall at St Mary's Community Centre in Pontefract, speaking to local residents about cancer awareness, screening and the support available. The event is part of a wider Cancer Alliance-funded programme, delivered with Red Roof Centre CIC and the Community Anchor Network, to improve cancer awareness and encourage earlier diagnosis across our communities.

International Time for Tea – 18 June

Our manager Sarah visited the Ridings shopping centre in Wakefield as part of the International Time for Tea event organised by Age UK to celebrate refugee week. Sarah helped to spread the cancer SMART message:-

Screening saves lives by catching cancer early and in some cases preventing it

Making cancer an everyday conversation, reducing fear and taboos around cancer

Awareness of your own body and recognising any changes that may need investigating

Reducing your risk with a healthy and active lifestyle, such as stopping smoking, losing weight if needed, being safe in the sun, eating more fibre and less meat, reducing alcohol consumption and keeping active

Time to act is now; if you have anything that just isn't right, don't put off seeking help from a medical professional.

Cancer Summer Roadshow, OPAL – 22 June

We were pleased to attend the Cancer Summer Roadshow at OPAL's Welcome In Community Centre in Horsforth, Leeds, where Jess hosted an information stall and delivered a short talk about the work delivered at Yorkshire Cancer Community. It was a wonderful opportunity to meet local people affected by cancer, share the support available and promote opportunities to get involved through Cancer SMART or Patient VIEW.

Horbury Show – 28 June

We had a wonderful day at the Horbury Show on Sunday 28 June, speaking to over 100 people, raising awareness of our service and encouraging early diagnosis through screening and having a healthy and active lifestyle.

The highlight of our stall was the bra pong, lovingly created by our retired manager Jill's husband Pete. Not only did it attract visitors to our stall, enabling us to have lots of impactful conversations with the public, but the event also helped us to raise over £300 which will help us to reach even more people.

A big thanks to our wonderful volunteers who gave up their time, empathy and experience to reach so many people.

Pictured L-R: Graham, Barbara, Stephen, Kathy & Sarah. Thanks also to Sam, not pictured.

Havercroft and Ryhill Community Learning Centre – 29 June

We were pleased to support the Community Wellbeing and Cancer Awareness event at Havercroft and Ryhill Community Learning Centre recently.

We made lots of connections with other support organisations and raised awareness of our services alongside bringing our Cancer SMART message to community members, encouraging cancer prevention and early diagnosis.

If you would like us to bring the Cancer SMART message into your local community or group, then get in touch on info@yorkshirecancercommunity.co.uk

What We're Working On

Patient VIEW meeting – 25th June 2026

Our Patient VIEW Panel met online on 25 June to avoid travelling during the exceptionally hot weather.

During the meeting, we welcomed Emily Godfrey from Healthwatch Wakefield, who is gathering patient experiences to help improve NHS patient transport services, and Dr Jae Hargan, Expert by Experience Strategic Lead, Dr Amalia Ruiz Estrada, Assistant Professor in Biochemistry and Pharmacology, and Jean Gallagher from the Patient and Public Involvement and Engagement (PPIE) panel at Bradford University, who are exploring how people with lived experience can help shape the future of cancer research.

The discussions highlighted the real value of bringing researchers and people with lived experience together to shape future services, improve patient experiences and influence the future of cancer research.

Healthwatch Wakefield explores cancer patient transport

Emily Godfrey (Research and Engagement Officer) from Healthwatch Wakefield (pictured), joined the panel to discuss a project exploring the experiences of cancer patients using NHS patient transport services. Healthwatch acts as the independent champion for people using health and social care services, gathering lived experience to help shape future NHS improvements.

Emily was keen to hear first-hand experiences from people affected by cancer, particularly as recent changes to eligibility criteria may be making it harder for some patients to access transport and attend appointments.

Panel members shared honest feedback about the need for a more joined-up, patient-centred approach. Key themes included making transport easier to arrange when appointments change, improving flexibility and communication, supporting carers to travel with patients where appropriate, and recognising transport as an important part of the overall treatment journey rather than a standalone service.

The discussion also highlighted examples of good practice, including flexible hospital teams, dedicated points of contact and overnight accommodation for patients travelling long distances. Healthwatch will combine this feedback with insights from other groups to help inform recommendations later this year.

healthwatch Wakefield

Bradford University seeks lived experience to shape future research

Dr Jae Hargan (Expert by Experience Strategic Lead), Dr Amalia Ruiz Estrada (Assistant Professor in Biochemistry and Pharmacology) and Jean Gallagher (Patient and Public Involvement and Engagement (PPIE) Panel), from Bradford University joined the panel to discuss how people with lived experience can help shape the future of cancer research.

The team is working to ensure that patient perspectives are embedded in the development of less invasive cancer treatments. While their Patient Participation Group has more than 150 members, only a small

number have lived experience of cancer, so they were keen to hear ideas on how to encourage more people to get involved.

Panel members shared practical suggestions, including working with trusted community organisations and support groups, being clear about the purpose and impact of involvement, and recognising that people's experiences often extend beyond a single cancer diagnosis.

The session reinforced the value of lived experience in helping researchers develop treatments and services that are not only scientifically robust but also centred on what matters most to patients and their families.

UNIVERSITY of BRADFORD

Creating more opportunities to influence cancer research

A key aim of the Yorkshire Cancer Community Patient VIEW Panel is to connect people with lived experience to opportunities where they can help shape cancer services and research. As part of this work, we recently met with Nachu Swaminathan, Public and Patient Involvement and Engagement Officer at Leeds Teaching Hospitals NHS Trust, to explore opportunities to work together and strengthen patient and public involvement in cancer research.

Nachu will be joining our next Patient VIEW Panel meeting on 3 September 2026, alongside one or two researchers from the Leeds Clinical Research Facility, to hear directly from our members and explore how lived experience can help shape current and future research. As well as introducing some of the projects taking place, they are keen to understand the perspectives of our panel and discuss meaningful opportunities for members to get involved in research – whether that's sharing experiences through surveys and focus groups, reviewing research ideas or taking part in interviews. No previous experience is needed, and involvement is flexible to suit you. A link to the survey is here: https://bit.ly/NIHR_PPI_survey

We look forward to welcoming Nachu and the research team in September and continuing to build opportunities for our members to influence the future of cancer research.

NHS
The Leeds Teaching Hospitals
NHS Trust

Upcoming events

Here's what we have coming up this month.

Wed 1 Jul – Stall at the Skelmanthorpe Health & Wellbeing Event, Mast Jubilee Community Garden at Skelmanthorpe Family doctors, Commercial Road, Skelmanthorpe, Huddersfield HD8 9DA at 10am – 2pm.

Thu 2 Jul – Cancer SMART champions in person get together at Scope Community Hub, 3 Brewery Wharf, Dock Street, Leeds LS10 1JF at 11am – 1pm.

Thu 2 Jul – Annual General Meeting at Scope Community Hub, 3 Brewery Wharf, Dock Street, Leeds LS10 1JF at 1.30pm – 3.30pm.

Wed 15 Jul – Support group leaders network online meeting – 1pm – 3pm. Contact Sarah@yorkshirecancercommunity.co.uk for joining link.

Thu 16 Jul – Stall at the Wakefield Wellbeing Event at Wakefield Trinity Rugby Ground, Doncaster Road, Wakefield WF1 5EY at 10am – 4pm.

Fri 24 Jul – Community cancer awareness event at St George's, Lupset, Wakefield WF2 8AA at 10am – 12pm.

Wed 29 Jul – Morley & District Health and Wellbeing Event at Queen's Street, Morley LS27 9DY at 11am – 3pm.

Wed 29 Jul – Cancer SMART talk for employees at Dewsbury Job Centre, Crown Buildings, Rishworth Road, Dewsbury WF12 8EF at 9am – 10am.

Wed 29 Jul – Stall at Barkerend Health Centre, Barkerend Road, Bradford BD3 8QH at 1pm – 3pm.

Sun 2 Aug – Stall at Yorkshire Day event, Oakwell Hall, Nova Lane, Birstall, Batley WF17 9LF at 11am – 6pm.

Watch out for our social media posts too to keep up to date on what we've got coming up.

@YorkshireCancerCommunity

@yorkshirecancercommunity

Cancer Support Group Leaders Network Meeting

Do you lead a cancer support group?
Thinking about starting one?
Then we'd love you to join our Support Group Leaders Network.

Connect with other group leaders, share experiences, and gain practical advice from experts to help your group thrive.

Our network meetings cover topics such as:

- Attracting and engaging new members
- Promoting your group in the community
- Finding inspiring speakers and activity ideas
- Fundraising tips and best practice
- Sharing challenges, successes and ideas with fellow leaders

Whether you're an experienced group leader or just getting started, our network offers a friendly, supportive space to learn, connect and grow.
Join us and be part of a community supporting those affected by cancer.

If you want to know more, our next group is meeting on Wednesday 15 July at 1pm – 3pm. Contact Sarah on sarah@yorkshirecancercommunity.co.uk for a joining link.

Yorkshire Cancer Community

ANNUAL GENERAL MEETING

With guest speaker Jason Pawluk, managing director of the West Yorkshire & Harrogate Cancer Alliance

The meeting will be hybrid so contact us for the link if joining remotely. In-person attendees must RSVP for catering purposes.
RSVP to info@yorkshirecancercommunity.co.uk

Scope Community Hub
3 Brewery Wharf, Dock Street
Leeds LS10 1JF

Thu 2 July, 2026

1.30pm - 3.30pm

Yorkshire Cancer Community
The voice of those affected by cancer in Yorkshire & the Humber

Love Your Liver Roadshow

Our friends at Liver Buddies are hosting their Love Your Liver Roadshow this month, in conjunction with the British Liver Trust. They are visiting Leeds, Huddersfield, Dewsbury and Bradford, so why not pop along to your nearest venue to find out more and claim your free liver scan. It's completely painless and doesn't take long but can give you valuable information about the health of your liver.

The Community Liver Health Checks Team are encouraging members of the public to get their liver checked for free in their mobile clinic vehicle. The event offers individuals an opportunity to prioritise their liver health by gaining valuable information about various types of liver disease and how to improve their liver health.

Liver Scan Criteria:

To be eligible for a free liver scan, you must have one or more conditions from the list below:

- You may have previously had or been at risk of Hepatitis B or C
- You consume more than 14 units of alcohol a week
- You are 50 years old and over with Type 2 diabetes
- You are 50 years old and over with a body mass index of >30 BMI or >27 BMI for some people depending on your ethnic background

You will be asked these questions prior to being offered a scan of your liver by the CLHC team. If you have had a liver scan in the last 12 months you will not be eligible.

Don't miss this fantastic opportunity!

Away from hospital systemic anti-cancer treatment project - Calderdale, Kirklees and Wakefield

Introduction

The NHS wants to give people more choice in how they receive their care. Some cancer treatments can be given safely outside of the hospital.

We would like to know what you think about having cancer treatment in a community clinic or even at home in the future.

The treatments we want you to think about include:

- Medicines you swallow as tablets
- Injections that go into the skin, which could be given by you or by a nurse

What would we like to know from you?

- Would you like to have a choice about where you have your treatment?
- If you could have your treatment away from the hospital, where would you choose to have it and why?
- If you had treatment away from the hospital what would make you feel safe?
- If your treatment is something you could give to yourself, would you want to think about this? For example, giving yourself oral medication or injections.

Link to the survey

https://forms.cloud.microsoft/pages/responsepage.aspx?id=RHpGohvyU0eCQeA6PSagH46LjASo4p1LqKCQMX0zpM1UQk1FWk9DS1pDOUc3RkFCTUFBSTdKMk9UTS4u&route=shorturl

Other Items

Sarcoma Awareness Month

Sarcoma

Sarcoma is a type of cancer that can appear anywhere in the body.
Around 5,300 people are diagnosed in the UK every year

There are two main types of sarcoma: -

- Soft tissue sarcoma
- Bone sarcoma (also known as primary bone cancer)

The most common symptom is a lump that is growing or changing. Other symptoms include: -

- Swelling, tenderness or pain in the bone that can be worse at night
- Stomach pain
- Feeling sick
- Loss of appetite or feeling full after only a small amount of food
- Blood in your poo or vomit

Sarcoma can affect anyone of any age. Although it is the third most common cancer in children, it's more common in middle-aged or elderly people. We don't know why sarcomas develop, but risk factors include age, genetic conditions such as neurofibromatosis, previous radiotherapy, exposure to some chemicals, and bone conditions such as Paget's disease. Treatment for sarcoma includes surgery, chemotherapy or radiotherapy.

For more information about sarcoma and other types of bone cancer, visit the bone cancers page of our website at **https://www.yorkshirecancercommunity.co.uk/bone-cancer/**

World Head and Neck Cancer Day - 27 July

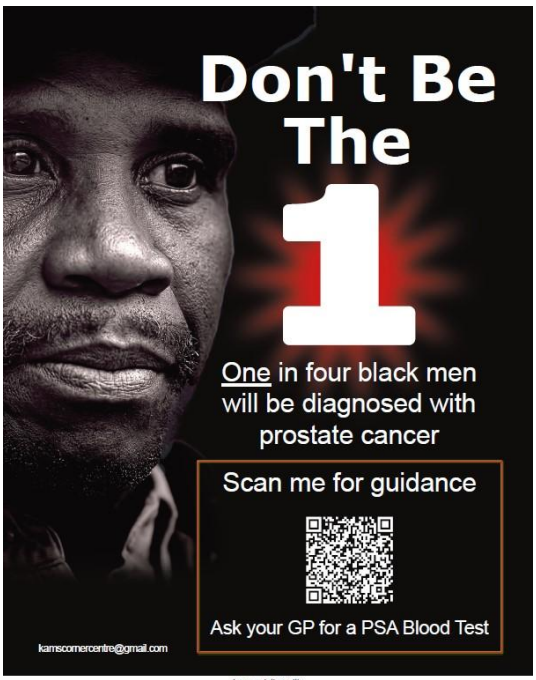
Head and Neck Cancer

There are over 30 areas of the head and neck where cancer can develop, including the mouth and lips, voice box (larynx), throat, salivary glands, nose and sinuses, and the area at the back of the nose and mouth including the tonsils. Brain tumours, thyroid cancer and eye cancer are not typically classified as a head and neck cancer.

Each cancer type has its own set of symptoms and treatment options. Tongue cancer is the most common type of head and neck cancer, and many cases of head and neck cancers are caused by smoking (especially laryngeal) or not eating enough fruit and vegetables (especially oral and laryngeal cancers).

To find out more information, including symptoms, support groups and inspiring life stories from real head and neck cancer patients, please visit the head and neck cancer page of our website.
https://www.yorkshirecancercommunity.co.uk/head-neck-cancer/

July is Ethnic Minority Cancer Awareness Month



It's a time to talk about the health inequities in how cancer affects Black, Asian and other minoritised ethnic communities.

While overall cancer incidence is lower among ethnic minority groups compared to the White population, certain cancers are more prevalent in minority groups. For instance, myeloma and stomach cancer are more common in Black people, gallbladder cancer in Black and Asian people, and prostate cancer in Black men. Additionally, Cancer Research UK found that Black and Asian individuals generally wait longer for a cancer diagnosis than their White counterparts.

Some people are diagnosed later. Some don't get the same support.

This month is about changing that and making sure everyone has equal access to cancer care, information and early diagnosis.

Here's what we know:

- Black African women are nearly twice as likely to be diagnosed with late-stage breast cancer as White women. 25% of Black African women and 22% of Black Caribbean women diagnosed with breast cancer are picked up at stage three and four, compared to 13% of White British women (Cancer Research UK).
- People with Jewish ancestry have a higher risk of carrying a BRCA gene change, which increases their chance of developing breast cancer.
- Around 1 in 40 Ashkenazi Jews and 1 in 140 Sephardi Jews carry this gene change, compared to 1 in 250 in the general UK population (NHS England).
- Black and South Asian people have been shown to have a lower awareness of breast cancer signs and symptoms and are less likely to check their chests monthly.
- There's lower screening uptake among ethnic minority groups due to cancer stigma, which often results in later diagnosis.
- Black men and Black people with a prostate are twice as likely to develop prostate cancer in their lifetime as White or other ethnicities, raising their risk to 1 in 4. For more information, see our Don't Be The One campaign page https://www.yorkshirecancercommunity.co.uk/dont-be-the-one/

Other charities such as CoppaFeel!, Race Equality Foundation and Trekstock are also aiming to:-

- Raise awareness and promote early detection
- Address disparities and acknowledge existing health inequities
- Engage with the community and share the mic with organisations who work to reduce health inequities.

Alcohol Awareness Week 6-12 July

Alcohol can sometimes play a centre stage role in our lives. It's there when we celebrate, commiserate, and when we're just trying to cope. After all this lovely sunshine, you might want to head for the nearest beer garden too.

But did you know that drinking alcohol causes 7 different types of cancer?

Yes, your favourite tipple could be putting you at risk. But how?

According to Cancer Research UK, drinking alcohol increases our risk of developing breast, bowel, mouth, upper throat, oesophagus, larynx and liver cancer. It is a significant risk factor for breast cancer in women.

There are three main ways that alcohol can cause cancer:

- Alcohol can damage our cells and stops cells repairing the damage
- Alcohol affects chemical signals which can make cells divide more often
- Alcohol makes it easier for cells in our mouth and throat to absorb harmful chemicals

Around 1 in 10 breast cancer cases are caused by drinking alcohol. That's around 4,400 cases a year

If you enjoy a cigarette with your drink, it's even worse news. Tobacco and alcohol both increase the risk of cancer, but when used together they increase the risk of cancer even more. This is because tobacco and alcohol have a combined effect that causes greater damage to our cells.

However, we all want to enjoy ourselves and make the most out of life. There's plenty of benefits to be gained from cutting back a little (if reducing your cancer risk is not enough of an incentive!). You will sleep better, and feel more refreshed in the mornings, you'll save money and may lose weight, and you'll reduce your risk of accidents, anti-social behaviour, high blood pressure and liver disease.

Tips to help you reduce your alcohol intake:

- Keep track of your drinking habits
- Have drink free days
- Alternate alcoholic and non-alcoholic drinks
- Don't stock up on alcohol at home
- Use a smaller glass and don't top it up
- Freeze leftover wine for cooking
- Don't buy in rounds
- Buddy up with a friend or family member

A few small changes can make a big difference in helping you cut down.

You could also download the Drink Free Days app which is a free tool to help you. For more information, visit **https://www.nhs.uk/better-health/drink-less/**

Mesothelioma Day – 3 July

In the UK, over 2,700 per year are diagnosed with mesothelioma. It is also known as 'diffuse' or 'malignant' mesothelioma. Mesothelioma is a form of cancer that affects the mesothelium. The mesothelium is a thin membrane that lines the inner surface of:

- The chest wall, where it is known as the pleura
- The abdomen where it is known as the peritoneum
- The testicles

The mesothelium also surrounds organs within these cavities for example the heart, lungs and intestines. It is far more common to have mesothelioma in the chest than in the abdomen. There is approximately one case of peritoneal mesothelioma to every 12 cases of pleural mesothelioma.

Mesothelioma is more common in men than in women and nearly half of the people diagnosed with the disease are over 75 years old. Exposure to asbestos is responsible for up to 9 out of 10 mesothelioma cases. Despite being preventable, asbestos exposure still occurs, and awareness is crucial in protecting future generations.

Mesothelioma Day hopes to raise awareness of mesothelioma and the risks of asbestos exposure, as well as honouring and supporting those affected by the disease. Mesothelioma UK are inviting everyone to "Go Blue for Meso" by taking part in a "Blue Light Walk". You can find out more by visiting their website https://www.mesothelioma.uk.com/amd/

For more information about mesothelioma, including local support groups, visit our dedicated page here https://www.yorkshirecancercommunity.co.uk/mesothelioma/

World Brain Day – 22 July

World Brain Day aims to raise awareness of keeping your brain healthy.

Whilst the causes of brain cancer are not often known, there's still a lot that you can do to promote brain health. It's important to recognise the warning signs and seek help quickly because early detection can save lives.

Warning signs include persistent headaches, fits, vomiting or feeling sick, memory problems, changes in personality, weakness, loss of balance, vision or speech problems. If you have any of these symptoms that don't go away, it's best to get checked by a GP. It probably isn't a brain tumour, but it's better to make sure.

You can reduce your risk of brain tumours by limiting ionizing radiation (avoid unnecessary medical imaging such as X-Rays or CT scans), minimising exposure to industrial chemicals, insecticides and pesticides, avoiding smoking and limiting alcohol use, maintaining a healthy lifestyle with regular exercise, a balanced diet rich in fruits and vegetables, and keeping your weight under control to boost your immune system and lower your overall cancer risk.

For more information, visit the brain tumours page of our website https://www.yorkshirecancercommunity.co.uk/brain-tumour/