

*SURGICAL MANAGEMENT PREFERENCES STUDY: Interview (Patient)

*VENUE: Medium MR unit

*DATE: 01/11/2004

*ID: Patient20

*INTERVIEWER: DJW

INT: FIRST OF ALL THANK YOU FOR AGREEING TO BE INTERVIEWED. I WOULD LIKE TO START WITH QUESTION ONE, WHICH IS CAN YOU TELL ME A BIT ABOUT WHAT YOU KNEW OR UNDERSTOOD ABOUT BREAST CANCER BEFORE YOU REALISED THERE WAS SOMETHING WAS WRONG WITH YOUR BREAST?

Patient: Erm, well, just to check over for any unusual lumps or bumps or change in the nipple or something like that, but, erm, that's about it really./

INT: RIGHT, OK. YEAH. AND DO YOU, HAVE ANY, ER, HAVE YOU EVER HAD BREAST CANCER YOURSELF BEFORE?

Patient: no.

INT: RIGHT, OK. HAS THERE BEEN ANY BREAST CANCER IN YOUR FAMILY, DO YOU KNOW?

Patient: Er, one of my older sisters did have it. Erm, but she was sort of about 65.

INT: RIGHT, OK. AND HOW LONG AGO WAS THAT?

Patient: Erm ... I'd say about four years ago, something ... yeah.

INT: RIGHT, OK. I MEAN IS THAT HERE IN, WAS IT TREATED AT CHESTERFIELD?

Patient: No, she lives in Grimsby ...

INT: OH, RIGHT, OK, SO IT'S OVER ...

Patient: ... so it was completely different.

INT: YEAH, RIGHT, OK. AND DID, WHAT, CAN YOU REMEMBER WHAT SURGERY SHE HAD FOR THAT?

Patient: She had, erm, she had her breast removed and ...

INT: THE MASTECTOMY?

Patient: Yeah. But, erm, she didn't have any other treatment after that.

INT: RIGHT, OK. AND SO THERE WAS NO RADIOTHERAPY OR CHEMOTHERAPY ...?

Patient: No, she didn't have anything.

INT: RIGHT, OK. ERM, AND HAVE YOU GOT ANY FRIENDS OR WORK COLLEAGUES OR ANYTHING LIKE THAT'S GOT BREAST CANCER?

Patient: Erm, a friend.

INT: YEAH. IS THAT RECENT, IS IT?

Patient: No, she's had it several years.

INT: RIGHT, OK. AND DID SHE HAVE SURGERY FOR IT, DID SHE?

Patient: Er, as far as I know, I haven't really, erm, yes she has had surgery, yeah, but, erm, hers is now ... erm, I think it's terminal.

INT: OH, RIGHT OK. I'M SORRY ABOUT THAT. BECAUSE IT'S SPREAD, HAS IT, DO YOU THINK?

Patient: Mm.

INT: YEAH, IT'S COME BACK. OK. ERM, SO CAN YOU, CAN YOU JUST TELL ME HOW YOU FIRST REALISED THERE WAS SOMETHING WRONG WITH YOU?

Patient: I found a lump under my arm.

INT: RIGHT, OK. AND THEN, SO WHAT HAPPENED AFTER THAT?

Patient: Er, well I rang the doctor and, erm, I got a, I think I got an appointment more or less the same day, but I didn't see the doctor I normally do because they said, you know, 'Do you mind who you see?' and I ... and it was, it was a doctor I didn't know, it was a young doctor I think.

INT: THIS IS A GP, YEAH?

Patient: Yeah, yeah. I think he'd just joined the group, because it was a group practice. And he said, because I had had a cyst before ...

INT: RIGHT.

Patient: And he said, 'Oh, it might be a cyst,' which obviously I thought it could be, and he didn't fi-, and I didn't find any lumps on my breast, and he had a tentative look, but he didn't find anything, but he said, erm, he says, 'I'll get a, erm, a urgent referral to the breast screening place at Chesterfield.' But this is the bit that I was annoyed about, that, erm, I didn't, I waited for a week and, er ... er, and I thought, 'I'll ring the breast screening place to see if they've, you know, they've got an appointment for me.'

INT: RIGHT.

Patient: Because I was only, we'd only just moved here. No, well, we'd moved, we'd been here about three months but, you know, the post has been forwarded and it was my old doctor and I thought the addresses might have got mixed up.

INT: MM. WHERE WERE YOU BEFORE?

Patient: Matlock.

INT: OH RIGHT.

Patient: So this is a Matlock doctor.

INT: RIGHT, OK.

Patient: And, er, and they said they didn't, hadn't had anything, you know, they hadn't had any referral note.

INT: RIGHT, OK.

Patient: And so I rang the doctor and she said - I think this was the Monday, I'd gone to the doctors on the Monday, it was the following Monday - and she says, 'Oh we've just typed the letter.'

INT: THIS IS A WEEK LATER.

Patient: This is a, this is supposed to be an urgent referral. 'Oh, we just typed the letter on Friday,' she said. So, erm, I didn't say anything but anyway I think another waited another day or two and then rang the breast screening place and she said, 'I'll search through to see if the letter's come, and ...' she says, 'I'll ring you back.' And she rang me back in about half an hour and she said, and she gave me an appointment the next day. So they were very good. It was just the doctor, I don't know what happened. Anyway, I'm now with the one in Baslow.

INT: OH, RIGHT, OK. SO YOU'VE SWITCHED PRACTICES NOW?

Patient: Yeah.

INT: OH RIGHT, OK. AND HOW DO YOU GET ON WITH THEM THEN?

Patient: Well, I haven't really had anything much to do with them yet apart from the nurse who came after the operation, and she seemed very nice.

INT: RIGHT, OK.

Patient: You know, she was very ... you know, she was OK.

INT: OK. AND, ERM, AND WHEN YOU FIRST FOUND THE LUMP, WHAT SORT OF THINGS WENT THROUGH YOUR MIND?

Patient: Erm, well, I was a bit worried that it might be cancer, but then I thought, well, you know, having had the cyst before, you know, possibility it could be that so ... I wasn't ...

INT: RIGHT, OK. SO, ERM, YOU GOT YOUR APPOINTMENT, HOW SOON DID YOU GET IT? WAS IT THE NEXT DAY OR SOMETHING YOU SAID AFTER ... [???] ?

Patient: Erm, yeah, within a day or two, I can't remember exactly.

INT: RIGHT, OK. AND SO CAN YOU JUST TELL ME WHAT HAPPENED WHEN YOU WENT ALONG FOR THAT APPOINTMENT PLEASE?

Patient: Erm, well I had a mammogram and, oh well first of all I went to, I saw the, Mr Chadwick, Doc-, yes, Mr Chadwick isn't it? And, erm, he examined me and he found a lump just underneath my breast which I hadn't noticed, it was quite a small one, but he found it straight away but I suppose [chuckles] he's used to it.

INT: YEAH, OF COURSE. THIS WAS, THE FIRST ONE WAS UNDERNEATH THE ARM WASN'T IT? THAT'S RIGHT, YEAH.

Patient: Yeah, that was quite noticeable. And, erm, anyway, so then I had a mammogram and a scan and what do they call it when they put needles in ...

INT: ER, OH, FINE NEEDLE ASPIRATION OR SOMETHING OR WHATEVER ... YEAH.

Patient: I don't know. Erm, so

INT: BIOPSY.

Patient: Biopsy, yes.

INT: THAT'S IT, YES, SORRY. THE BIOPSY. [???

Patient: And, erm, so then I went back to see Mr Chadwick and he said from what they'd seen from the scan and everything, they was 90 per cent, 95 percent sure it was cancer, but until they got the results back from the biopsy they couldn't be, you know, totally certain. And I had to wait a week ...

INT: FOR THE RESULTS.

Patient: Results, yeah.

INT: THAT APPOINTMENT, DID ANYBODY GO ALONG WITH YOU OR DID YOU GO BY YOURSELF?

Patient: My husband, he's been great, he's come with me for every ...

INT: RIGHT OK.

Patient: ... you know, and come into the consultant every time I've seen him. So ...

INT: AND AFTER YOU SAW MR CHADWICK, DID YOU SEE A BREAST CARE NURSE AT ALL?

Patient: Erm ... no, I didn't, erm, I didn't see one that time but I did ...

INT: THE SECOND TIME.

Patient; ... the second time.

INT: MM, WHEN YOU YOUR DIAGNOSIS?

Patient: Yeah.

INT: MM, OK. ERM, SO HE SORT OF SAID HE WAS ABOUT 95 PER CENT CERTAIN IT WAS GONNA BE CANCER, ERM, AND YOU HAD TO WAIT A WEEK FOR YOUR RESULTS, YEAH?

Patient: Yeah, I had a week, yes.

INT: I MEAN HOW WERE YOU DURING THAT WEEK THEN? HOW WERE YOUR FEELINGS, I MEAN, WHAT WAS GOING THROUGH YOUR MIND ...?

Patient: Erm, pretty calm.

INT: YEAH?

Patient: [chuckles] I'm not a panicking person.

INT: RIGHT, OK. THAT'S GOOD. I MEAN DID YOU HAVE ANY THOUGHTS ABOUT WHAT YOU MIGHT DO ABOUT IT IN TERMS OF SURGERY IF IT WAS CANCER?

Patient: Erm, well I was hope-, it, I was hoping that I could have just a lump-

INT: LUMPECTOMY.

Patient: Lumpectomy, erm, but I was going to wait and see what he thought.

INT: RIGHT, OK. SO YOU WERE AWARE THERE WAS TWO OPERATIONS YOU COULD HAVE?

Patient: Yes.

INT: THE MASTECTOMY OR LUMPECTOMY?

Patient: Yeah.

INT: OK. ERM, SO WHEN YOU WENT BACK TO HEAR YOUR DIAGNOSIS, CAN YOU JUST TALK ME THROUGH THAT?

Patient: Erm ...

INT: FROM WHEN YOU SORT OF WENT INTO THE CLINIC AND WENT IN?

Patient: ... Well, erm, I saw Mr Chadwick again and I think the breast care nurse was with him as well, and, erm, and he said that both the biopsy for the breast one and the lymph gland both was positive, and, but because of the position of the cancer in my breast, because it was very, it was here, right on the very edge, and he said, 'Unless you particularly wanted to have ...

INT: THE MASTECTOMY.

Patient: ... mastectomy, erm, there wasn't any real reason not to, there wasn't any reason that it would be a better result, unless I particularly wanted, you know, some people do, don't they?

INT: THAT'S RIGHT, YEAH.

Patient: He says, the only bad thing about it, if they found that there was, that there was more cancer than they thought, because he said it was about a centimetre in size, then they take another centimetre around, er, that then you'd have to have another operation afterwards, you know, you know, to have the mastectomy if they found ...

INT: ALRIGHT, YEAH, SO IF THE MARGIN WASN'T CLEAR THAT HE TOOK OUT, IF THERE WERE CELLS IN THERE ... OH, RIGHT, OK.

Patient: [???

INT: ERM, AND SO THAT WAS FOR THIS ONE, UNDERNEATH YOUR BREAST.

Patient: Yeah, that was for that one. The ...

INT: WHAT ABOUT THE ...

Patient: The other, he said at the time that, erm, that it normal-, it comes out as one, well the lymph glands come out as one lump ...

INT: OH, RIGHT, OK.

Patient: ... and, erm, and it depended on how many were infected and what sort of, erm, after-treatment you have, you know.

INT: RIGHT, OK. OK. ERM, WHERE ARE WE? AND SO ... AND THEN DID YOU SEE, AFTER YOU SPOKE TO MR CHADWICK, DID YOU SAY YOU SAW THE BREAST NURSE NEXT, IS THAT RIGHT?

Patient: Er, briefly spoke to her, she said if I'd got any, erm, worries about it, you know, any worries, you know, just to ring her up. But then, because my lymph gland had come out positive, I had to have, I had to go back and have, er, x-rays for my lungs and, erm, kidneys and the screening for bones.

INT: RIGHT, OK.

Patient: And she said, 'Oh it'll be about ...' I can't remember when this was, it would be the beginning, probab-, must have been the beginning of the week, this appointment, and she, she said, oh it might have been about a Tuesday, I can't remember, and she said, erm, 'It'll probably be the beginning of next week ...' when I get the appointment for the, the bone scan, they would ring up. But in fact I think they rang the next day and said they'd got a cancellation, did I want to go?

INT: OH, RIGHT.

Patient: So I think was about the Wednesday then, so it must have been, must have been Monday and then I went on the Wednesday, and so I had all this screening and everything, and I was a bit worried about that because, [???], that was, did get me a bit about bone cancer.

INT: RIGHT, OK.

Patient: And, er, and then she came, or the breast nurse came and she said, 'You've, Mr Chadwick'll see you tomorrow with the results.'

INT: RIGHT, OK.

Patient: So, erm, we went in the next day and he said they was all clear ...

INT: [???]

Patient: No, he said, everything was clear except there was some hot spots on my bones thing.

INT: RIGHT, OK.

Patient: And, er, and I'd have to have some x-rays for these hot spots.

INT: RIGHT, OK. SO WHAT WAS GOING THROUGH YOUR MIND AT THIS POINT, THEN?

Patient: Well I def-, yes, it wasn't before when I, now I come to think about it, it wasn't before I was worried about the bone scan, it was him, it was then after I'd heard about these hot spots.

INT: OK.

Patient: [chuckles]

INT: YEAH. WELL YOU WOULD BE, WOULDN'T YOU, REALLY?

Patient: Yeah.

INT: HOT SPOTS DOESN'T SOUND VERY NICE [???]

Patient: It doesn't sound very good, does, it. So, anyway, he says, 'It's probably nothing,' he says, he thinks it will be just a bit of wear and tear arthritis or something. He says, 'That's what it normally is.'

INT: OK.

Patient: But, erm, so I had to wait a week for the hot spot results. [chuckles]
Anyway it came out OK.

INT: OH, WELL, THAT'S GOOD NEWS THEN. I BET YOU WERE QUITE RELIEVED THEN, YEAH?
OK.

Patient: Yeah, so, anyway, that was that.

INT: WHEN YOU SPOKE TO THE BREAST CARE NURSE AFTER SEEING MR CHADWICK, HE'D JUST GIVE YOU YOUR DIAGNOSIS, DID SHE TALK ABOUT THE OPERATIONS OR ANYTHING LIKE THAT, OR ...?

Patient: Erm ... yeah I think she did, erm, I think, because Mr Chadwick had been very careful about going through everything, erm, about telling about, you know, er, you might have trouble moving your arm afterwards and all this, but she went over it a bit again, that sort of thing, and, you know, have to do exercises and things. Erm, er ... I think, I think mainly he'd really gone through everything very carefully, you know.

INT: MM, RIGHT, OK. ERM, AND HOW SOON AFTER YOUR DIAGNOSIS DID YOU HAVE YOUR OPERATION?

Patient: Erm, about ten days.

INT: SO DID YOU HAVE A PRE-, DID YOU GO FOR PRE-ASSESSMENT AT ALL?

Patient: Yes.

INT: WHEN WAS THAT THEN, DO YOU REMEMBER?

Patient: Erm, it was the Thursday before I went in on the Monday.

INT: RIGHT, OK. AND DID YOU SEE A BREAST CARE NURSE THEN? DO YOU REMEMBER?

Patient: Erm, yes.

INT: MM. DID YOU SEE THE SAME BREAST CARE NURSE ALL THE WAY THROUGH?

Patient: Yes, Donna.

INT: RIGHT, OK. ERM, AND SO THEN, WHEN YOU WENT FOR YOUR OPERATION, CAN YOU JUST TELL ME WHAT HAPPENED ON THE DAY WHEN YOU WENT IN AND ...

Patient: Well, Grant took me in and, er, he more or less sat with me till they through him out, [chuckles] which was about twelve-ish I should think, and then they came with the, you know, put socks on and gown and all that stuff. And, er ... what else? I think there was four, it was a ward with six in and there was four people going in and I was the last one. And they said it would be about half past three, the operation, and they asked me if I wanted any pre-, what is it ...?

INT: PRE-MED, YEAH.

Patient: Pre-med, yeah, and I said, no, I didn't. [chuckles] Because I would prefer to read my magazine.

INT: AH, RIGHT, OF COURSE.

Patient: Otherwise you would go to sleep, don't you?

INT: YES, THAT'S RIGHT. AND DID THE ANAESTHETIST COME TO SEE YOU OR MR CHADWICK OR ...?

Patient: Er, Mr Chadwick didn't come because he'd gone on his holidays.

INT: AH, SO, WAS IT MR HOLT?

Patient: It was Mr Holt.

INT: MR HOLT WHO DID THE OPERATION?

Patient: So I was, because I'd always seen Mr Chadwick, I was just, I was a little bit worried about that it wasn't Mr Chadwick, it was Mr Holt. Anyway, everyone in the ward said Mr Holt was really nice and they thought he was better than Mr Chadwick, [chuckles] and then ...

INT: WELL WE WON'T FEED THAT BACK.

Patient: We won't feed that back. But I mean I found Mr Chadwick fine, but I think maybe ... anyway that's by the by.

INT: DID MR HOLT COME ROUND AT ALL, DID YOU GET TO MEET HIM?

Patient: Mr Holt, yes, he came before the operation and spoke to me, yes. And, oh he did the marking out.

INT: OH RIGHT, OF COURSE, YEAH.

Patient: Yeah, arrows to make sure they get the right side and everything.

INT: IT'S A BIT COMFORTING, ISN'T IT?

Patient: If somebody chops the wrong leg off or something.

INT: AND HOW WERE YOU WHEN YOU'D COME BACK AFTER THE OPERATION? WERE YOU OK WHEN YOU CAME ROUND?

Patient: When I came round, erm, Grant was back, Grant was there, and I woke up and I had a cup of tea and piece of toast.

INT: RIGHT, OK. DIDN'T FEEL SICK AT ALL, DID YOU?

Patient: No.

INT: OK. AND HOW LONG DID YOU STOP IN HOSPITAL FOR?

Patient: I came out next, following lunchtime.

INT: RIGHT, OK, SO IT WAS JUST 24 HOURS, 48 HOURS [???

Patient: Mm.

INT: OH, THAT'S OK. ERM, GOING BACK TO WHEN MR CHADWICK GAVE YOU YOUR DIAGNOSIS, DID HE USE ANY DIAGRAMS OR PICTURES, ANY VISUAL AIDS AT ALL?

Patient: Erm, yes, he, well he drew, he drew out sort of, erm, well he just drew on a piece of paper the sort of, the size of the cancer and, you know, how, the amount he'd cut out and everything. In fact it was Mr Holt who did it in the end.

INT: [???], YEAH. AND DID HE USE MAMMOGRAMS OR ANYTHING LIKE THAT, ANY OTHER VISUAL AIDS DO YOU THINK?

Patient: No. No.

INT: RIGHT, OK. AND THE BREAST CARE NURSES, DID THEY USE ANY VISUAL AIDS, ANY DIAGRAMS, PICTURES?

Patient: No.

INT: DID THEY GIVE YOU ANY WRITTEN INFORMATION?

Patient: She gave me information on, erm, a lump- ... I keep forgetting what's it's called.

INT: THE LUMPECTOMY?

Patient: Lumpectomy, she gave me a leaflet about it.

INT: RIGHT, AHA. ERM, LET ME SEE ... [???] QUESTIONS I THINK, WE MUST HAVE GONE QUITE A WAY NOW, [???] THIS IS WHAT HAPPENS IN THESE INTERVIEWS, YOU SEE, ERM, THINKING ABOUT THE TIMES YOU WERE WITH MR CHADWICK, HOW DO YOU FEEL YOU GOT ON WITH HIM?

Patient: I got on with him, yeah. He was ...

INT: DID YOU FEEL HE WAS ... SORRY, YOU WERE GONNA SAY ...?

Patient: No, he was, he was fine.

INT: RIGHT. BUT DO YOU FEEL HE WAS LISTENING TO YOUR NEEDS AND YOUR CONCERNS AND THINGS?

Patient: Yeah, he was very, I thought he was very good be-, erm, answering all questions, you know, he seemed to go into everything very carefully.

INT: AND WHEN YOU WERE SPEAKING WITH DONNA, THE BREAST CARE NURSE, HOW DO YOU FEEL YOU GOT ON WITH HER?

Patient: Erm, she was, she was all right. Yeah.

INT: YEAH. DO YOU FEEL THAT SHE LISTENED TO YOU, UNDERSTOOD YOUR NEEDS AND YOUR CONCERNS AND THINGS?

Patient: Yeah. I did ring, the only time I did ring her up was that week about the hot spots ...

INT: RIGHT.

Patient: ... because I did, I was, I did get a little bit worried about that, and I did ring her, but, erm, and ... so I never really ... erm, I suppose she did reassure me a little bit but I ...

INT: RIGHT. AND, ERM, [??] WHEN YOU, ERM, HAD THE TWO OPTIONS DESCRIBED TO YOU, THE LUMPECTOMY AND THE MASTECTOMY, HE MENTIONED BOTH OF THOSE, HOW SOON AFTER HEARING THAT DID IT TAKE YOU TO MAKE UP YOUR MIND WHAT YOU WERE GOING TO HAVE?

Patient: Well I decided straight away because he, he, erm, because he more or less said, because of the position of it, erm, it was a reasonable option to take, and I didn't partic-, I didn't really feel like going through the trauma of having a mastectomy unless I needed to.

INT: RIGHT, YEAH, SURE. AND, ERM, SO YOU OPTED FOR THE WIDE LOCAL EXCISION, THE LUMPECTOMY?

Patient: Mm, yeah.

INT: ERM, WHEN YOU WERE TALKING WITH MR CHADWICK, ERM, ABOUT THE CANCER AND ITS TREATMENT, HOW MUCH OF IT, WHAT HE SAID, DID YOU FEEL YOU UNDERSTOOD?

Patient: Erm, I understood what he said about the operations but, erm, I don't really understand the, erm, well, yes, he did tell, because I was a bit mixed up between radiotherapy and chemotherapy.

INT: RIGHT, YEAH.

Patient: And he did try to ...

INT: EXPLAIN.

Patient: ... explain the difference, that chemotherapy's a drug treatment and the radiotherapy is ...

INT: YEAH, SOME PEOPLE DO GET THE TERMS MIXED UP AS WELL.

Patient: Yeah.

INT: LIKE SOME PEOPLE THINK THAT WITH RADIOTHERAPY YOUR HAIR'S GONNA DROP OUT.

Patient: Yeah, yeah. In fact he spoke, 'cos he had explained all that to me and it was funny because the lady in the bed opposite me, she thought that, that radiotherapy is when your hair dropped out, and I said, 'No, it's not, it's the chemotherapy.'

INT: RIGHT, OK, SO YOU PASSED THAT BIT OF INFORMATION ON, DID YOU? THAT'S ALL RIGHT, THAT'S GOOD. THAT'S OK. ERM, WAS THERE ANYTHING APART FROM THAT THAT YOU FOUND DIFFICULT TO UNDERSTAND? ANYTHING AT ALL YOU FOUND DIFFICULT?

Patient: Erm ... I don't think, I don't think so really, but, erm ... the subsequent results is difficult to understand, but ...

INT: RIGHT, OK. SO, AFTER YOUR OPERATION, HAVE YOU BEEN BACK TO SEE ...

Patient: Yes.

INT: ... THE UNIT, SO CAN YOU JUST TELL ME WHAT HAPPENED THERE, PLEASE?

Patient: Er ... not very good.

INT: RIGHT, OK.

Patient: Erm, apparently, because he, Mr Chadwick said that normally all the lymph glands can come out in like a little, more or less an envelope.

INT: OH RIGHT, OK. OK.

Patient: I don't know [???] and everyone has got a different amount, some's got more than others. But apparently, erm, all of my lymph glands were infected that they took out but they weren't able to get them all out because some of there were stuck to a blood vessel.

INT: OH, RIGHT, OK.

Patient: Which I presume must be a bit unusual, I don't know.

INT: I DON'T, I'VE NEVER, WELL, I'VE NEVER HEARD [???] I'M NOT A BREAST SURGEON OR ANYTHING LIKE THAT SO I'M NOT SURE REALLY.

Patient: So, erm, so because I was a bit taken back by all this, I never really sort of probably went into questions with him about it [???]

INT: OK. SO HOW LONG AGO WAS THAT THEN, YOU HAD THAT INFORMATION?

Patient: Er ... the week before last. I see the, I'm seeing the oncologist ...?

INT: OH HE'S REFERRED YOU TO THE ONCOLOGIST, YES.

Patient: ... on Thursday.

INT: RIGHT, OK. SO DID HE HAVE AN IDEA OF WHAT YOUR TREATMENT'S GOING TO BE AFTER THIS?

Patient: Well he said the only good thing about it is the cancer is very, erm, hormone related.

INT: RIGHT, OK, MM.

Patient: It seems there's different kinds of cancer.

INT: YEAH. THERE'S DIFFERENT KINDS OF CANCERS.

Patient: Yeah, and there's a lot of new good drugs out for hor-, for this particular kind ...

INT: RIGHT, OK.

Patient: ... of cancer so, so he's, I mean he doesn't say exactly because they've got, he's got to discuss it with the oncologist, erm, but they'll probably start off with the hormone drugs and then, er, and the radiotherapy. Because before he said, he said they would start off with chemotherapy, and then go to radiotherapy, but now he says that they do the hormone drugs and the radiotherapy and then keep the chemotherapy as a last resort.

INT: OH, RIGHT. OK.

Patient: And then I said, what, so I said, 'What's the, what do you think the prognosis of this is?' and he said, erm, 'High risk.'

INT: RIGHT, OK.

Patient: So.

INT: AND HOW DID YOU FEEL ABOUT THAT WHEN HE SAID THAT?

Patient: Not too thrilled. [chuckles]

INT: NO, NO, ERM ...

Patient: But I try to keep positive.

INT: YEAH.

Patient: Erm, I mean everyone's different, aren't they and ...

INT: YEAH. WELL I THINK YOU HAVE TO DO, YOU HAVE TO KEEP POSITIVE, THROUGHOUT ALL OF IT REALLY. YEAH. KEEP POSITIVE, DEFINITELY, BECAUSE YOU'VE GOT TO REALLY.

Patient: So I'm just trying to get on with my life and, you know, in between as best I can.

INT: YEAH. [???] ERM, SO, WHERE DID WE GET TO ... THE INFORMATION PACK THAT THE BREAST CARE NURSE GAVE YOU, DID YOU READ THAT INFORMATION, DID YOU?

Patient: Yes, but ...

INT: WAS IT USEFUL IN ANY WAY DO YOU THINK OR ...?

Patient: Erm, no, not really because I'd, I think everything had been said.

INT: MM, RIGHT, OK. SO YOU FEEL THAT, YOU KNOW, MR CHADWICK HAD DONE A PRETTY GOOD JOB DESCRIBING STUFF?

Patient: Yeah. I feel that he had, yeah, and, you know, anything that Grant or I asked him he'd, you know, he went to great care to explain, and he didn't sort of felt that he'd got all the ti-, you know, you didn't feel he was rushing you or anything like that.

INT: OK. WHEN YOU'D MADE YOUR MIND UP TO HAVE THE WIDE LOCAL EXCISION, YEAH, THE LUMPECTOMY, AT ANY POINT DID YOU EVER CHANGE YOUR MIND OR HAVE SECOND THOUGHTS ABOUT THAT OPERATION?

Patient: No, no, I didn't.

INT: RIGHT, OK.

Patient: Erm, I don't know what'll happen in the future, I may not, I may have to have one, but ...

INT: RIGHT, OK. AND DO YOU REMEMBER WHEN YOU SIGNED THE CONSENT FORM FOR THE OPERATION?

Patient: Yeah.

INT: WHEN WAS THAT THEN?

Patient: Erm, I think it was with the breast care nurse ...

INT: AFTER YOUR DIAGNOSIS?

Patient: After I'd ... yes.

INT: YES, THAT SAME VISIT?

Patient: Yeah, I think so, yeah.

INT: SO YOU'D MADE YOUR MIND UP FAIRLY, FAIRLY SOON WHAT YOU WERE GOING TO HAVE, IS THAT RIGHT?

Patient: Erm ... no, it wasn't, it was when I, no, when I did, signed the form was not with the breast care nurse, because I didn't see her that time, it was when, the pre-assessment.

INT: AH, THE PRE-ASSESSMENT CLINIC.

Patient: Yes.

INT: YOU SAW HER THEN, DID YOU?

Patient: Yeah, that's when I signed it.

INT: RIGHT, OK.

Patient: Yes.

INT: RIGHT.

Patient: But Donna did come, erm, did come and see me that morning I left, before I left.

INT: RIGHT, WHICH ONE? THE PRE-ASSESSMENT CLINIC?

Patient: No ...

INT: OH THE HOS- ...?

Patient: When I was in hospital, the morning that I left the hospital she came to see me then.

INT: RIGHT. AND WHAT DID YOU TALK ABOUT THEN?

Patient: Erm, just, erm, about, erm ... well, the, erm, that the nurse would come, you know, from the ...

INT: THE DISTRICT.

Patient: ... district nurse would come and, er, don't worry about if it's, oh, don't worry about that anything will burst or anything like that ...,

INT: [???] OK.

Patient: You know, don't worry about anything 'cos it's, every-, it'll be fine, you know.

INT: MM. AND HOW HAVE YOU BEEN WITH THE EXERCISES AND THINGS?

Patient: I didn't really need to do them because I never had any trouble.

INT: OH. OH, THAT'S GOOD. WELL THAT'S A GOOD THING, YEAH.

Patient: I just used my arms as normal so ... [chuckles] I haven't had any problems there.

INT: WHEN YOU WERE, IN BETWEEN HEARING YOUR DIAGNOSIS AND HAVING THE OPERATION, DID YOU LOOK FOR ANY FURTHER INFORMATION OR WERE GIVEN ANY FURTHER INFORMATION EITHER FROM YOUR GP, RELATIVES, FRIENDS AND NEIGHBOURS, SUPPORT GROUPS? DID YOU LOOK AT BOOKS, MAGAZINES, VIDEOS? DID YOU GO ON THE INTERNET AT ALL TO LOOK FOR BREAST CANCER AND ITS TREATMENT? ANYTHING LIKE THAT?

Patient: No. I didn't, because, erm, I thought I'd got enough information. I mean I did tell people and things but I can't say that I asked anyone's advice. Erm ... and, er, no I didn't go onto the internet or anything.

INT: RIGHT, OK. SO WHO DID YOU TALK TO THEN? DID YOU TELL YOUR FRIENDS, FAMILY ...?

Patient: My sisters.

INT: RIGHT. HOW MANY HAVE YOU GOT?

Patient: Three.

INT: THREE? THERE WAS DEFINITELY ONE OLDER, I KNOW MUCH, ANY YOUNGER?

Patient: They're all older.

INT: AH, RIGHT, OK.

Patient: And my niece, I've very close to my niece.

INT: RIGHT, OK.

Patient: She spends a lot of time with us.

INT: RIGHT, OK. RIGHT. AND, ERM, LOOKING BACK FROM WHEN YOU WERE FIRST DIAGNOSED UNTIL NOW, HOW DO YOU FEEL ABOUT THE CARE THAT YOU'VE RECEIVED?

Patient: I think they've been, they've been very good. I can't really, erm, because one, oh, one of our, erm, friends said to Grant, 'Why don't you go on to, why don't you, erm, you know, pay for treatment, you'll get it ...'

INT: WHAT, GO PRIVATE?

Patient: ... go private, but Grant said, 'Well we feel that we're getting good treatment without doing that,' and we can't afford it anyway, we've only just moved house, [chuckles], but, no, we can't, we don't feel that we could have got any better treatment by going, you know, actually paying for anything differently.

INT: RIGHT, OK. AND DO YOU FEEL THAT THE CARE YOU'VE MET HAS COME UP TO YOUR EXPECTATIONS, THAT YOU'VE HAD?

Patient: Erm ... well more than because I didn't, I don't really know anything about being ill, I'm never ill.

INT: RIGHT, OK.

Patient: I've never really been ill as such.

INT: OH RIGHT. YOU'RE GENERAL A FIT AND WELL PERSON, YEAH?

Patient: Yeah, I was. [chuckles] I thought I was.

INT: THAT'S ALL RIGHT. ERM, AND IF YOU WERE TOLD YOU HAD THE POWER AND MONEY TO CHANGE ONE THING ABOUT THE BREAST SERVICE AT CHESTERFIELD, WHAT DO YOU THINK THAT WOULD BE?

Patient: Mm ... erm ... not having, oh, the time that, erm, we went for the results, to get the results from Mr Chadwick, we had to go into that, wait in that, erm, er ... what do they call it ... Suite One.

INT: RIGHT, OK.

Patient: I don't know if you've been there. I think ...

INT: ER, I'VE BEEN TO THE UNIT, I'M JUST TRYING TO THINK ...

Patient: I think it's sort of a shared thing where all the other ...

INT: YES, I REMEMBER NOW, YES.

Patient: I don't like it in there.

INT: NO. WHAT DID YOU NOT LIKE ABOUT IT?

Patient: Oh, there's loads of people sat there all coughing and spluttering and you think you're gonna catch a load of things.

INT: WELL IT'S LIKE THAT IN THE HALLAMSHIRE. YOU GO DOWN FOR LUNCH AT TWELVE O'CLOCK AND IT'S FULL OF PEOPLE COUGHING AND SNEEZING ...

Patient: I know. I mean the few ... [??] going back to the breast screening clinic, it's a bit calmer and quieter and nice in there. I've got to go to Suite One on Thursday as well, which is a bit ...

INT: WHAT TIME'S YOUR APPOINTMENT THERE?

Patient: Er, twenty past two.

INT: AH, RIGHT, OK. ERM, NOW YOU'VE BEEN THROUGH THIS EXPERIENCE, WHAT DO YOU THINK ARE THE MOST IMPORTANT THINGS SOMEONE WITH BREAST CANCER NEEDS TO KNOW FIRST ABOUT THEIR DIAGNOSIS? WHAT SORT OF THINGS DO YOU THINK THEY NEED TO KNOW ABOUT THEIR DIAGNOSIS?

Patient: Erm, well I think it's good to have a fairly quick diagnosis because otherwise you ... even if it's a bad, even if it's bad you, you know, it's nice to know ...

INT: YEAH, IF YOU KNOW FOR SURE.

Patient: Yeah. Erm ... I don't know, I'm not really the right person to advise anyone. [chuckles]

INT: WHAT SORT OF THINGS DO YOU THINK YOU WOULD LIKE TO KNOW ABOUT YOUR DIAGNOSIS, LOOKING BACK, WAS THERE ANYTHING YOU THINK YOU WOULD HAVE LIKED TO HAVE KNOWN AT THE TIME, ANYTHING ...?

Patient: Well I think he, he did his best in the circumstances. I mean, obviously, er, they don't know what's gonna happen, do they, till they've done the surgery?

INT: YEAH, EXACTLY. YEAH, THEY ONLY KNOW ... THEY'VE ONLY GOT LIKE LIMITED INFORMATION.

Patient: Yeah.

INT: AND SORT OF MORE BECOMES APPARENT LATER ON.

Patient: Mm.

INT: WHAT SORT OF THINGS DO YOU THINK SOMEONE WITH BREAST CANCER NEEDS TO KNOW ABOUT THE OPERATIONS THEY CAN HAVE?

Patient: Well to have it fully explained to them, which, which we did, so nothing really came as a nasty shock or anything. And, erm ... he said that, erm, that it might, you know, fill with fluid ...

INT: RIGHT, YEAH.

Patient: ... because, when they take the lymph glands out it leaves a hole and, er, you sometimes get fluid, or they might put a drain in but they didn't so, which I was pleased about. But it did fill with fluid and ...

INT: DID YOU HAVE GET IT ASPIRATED?

Patient: ... and he drained it when, that time when he took my stitches out.

INT: RIGHT, OK.

Patient: Which ... but it's, he said it might, might do it again but it's been OK.

INT: MM, OK. ERM, RIGHT, I THINK, I THINK WE'VE BEEN THROUGH EVERYTHING ACTUALLY.

Patient: Yeah?

INT: [???) JUST MAKE SURE I HAVEN'T MISSED ANYTHING. THE LAST QUESTION IS, IS THERE ANYTHING ELSE THAT YOU'D LIKE TO ADD TO WHAT WE'VE BEEN TALKING ABOUT TODAY? ANYTHING YOU THINK WE'VE MISSED OR ANY IMPORTANT POINTS YOU THINK WE HAVEN'T COVERED?

Patient: ... Erm ... I don't think so ...

INT: OK. RIGHT? WELL I'LL SWITCH OFF. THANK YOU VERY MUCH.