



2023年1月 協會財政報告:

12月結存	£ 33,400.41
1月收入	£ 243.44
1月支出	£ 19.20
1月結存	£ 33,624.65

蘇豪關懷癌症月會 (MCSG Soho)

每月第二週六 · 上午 11:00 至下午 1:00 · 倫敦中華基督教會蘇豪福音堂地庫
Soho Outreach Centre (SOC), 166A Shaftesbury Avenue, London, WC2H 8JB

病友園地

張偉強

2017年，我確診乙狀結腸有腫瘤，但淋巴結無受影響，是第二期大腸癌。我接受剖腹腫瘤切除術，無須化療和電療。翌年，確診大腸癌轉移到肝臟，是第四期大腸癌。醫院的翻譯員介紹我認識了癌症協會的義工，她幫我翻譯外又帶我相信耶穌。6月，我是英國首位接受最先進的機械臂微創肝癌切除術，手術過程被錄影下來。手術後沒有任何不適，翌日出院，真是耶穌賜下的平安。因着患癌症，當年我獲市政府的安排，成為首位實地觀察長者屋是否適合自己的市民。榮獲雙重第一！（請看癌症月訊 2. 2019）化療後我經常排氣，令我感覺尷尬，影響了我的社交生活，而且排便後總是有未排清的感覺。護士解釋此乃大腸手術後的常有現象，需要時間適應。我希望及早發現任何癌症擴散或轉移的可能，稍有不適我便聯絡專科護士作做轉介。例如我的膽黃素偏高，血小板偏低，被轉介到血科覆診。（請看癌症月訊 2021年7月）

倫敦兩年封城，我每日除了在公園散步，和到超市購買必需物品，儘量避免外出。我又經常到長者屋地下的健身室做運動，保持關節的活動能力。2021年，我擔心疫苗的副作用會引致血栓塞。雖然腫瘤科、大腸科、血科、GP、朋友、教會牧師和義工等，多番安慰和鼓勵我，但我始終沒有接種疫苗，也沒有受感染。每日黃昏，我在日曆上寫上「平安健康感恩謝主耶穌」，如常地過了一天就是幸福。到了2022年終，我居住的長者屋全幢大廈有25個單位，約1/7的住客無注射疫苗，也無人受感染。我如常接受流感疫苗，我也會安GP的建議，接受肺炎疫苗注射。2022年初，有一名住客失蹤了。長者屋的辦事處職員，在閉路電視上不見他的蹤影便報警。警察到訪，向鄰居查問有關此人的行蹤。一週後，終於在醫院尋獲了他。他患了老人癡呆，和輕微行動不便。此後便有DRI職員到訪，為他戴上衛星定位的追蹤手錶，又邀請我和其

他住客參加他們的研究計劃，為期兩年。我有WiFi又略懂英文，便能參加。很快我接獲DRI送來免費的電子血壓計、電子磅和iPad。又在我的大門、睡房、廚房和廁所的頂部，安裝了數個接收器。

他們的職員每週來電話，關心我的小便是否暢順、有無失禁、睡眠、胃口和活動情況等，類似每週一次見GP檢查身體。我的血壓、體重、BMI基礎新陳代謝率等資料和檢查報告，會在我的iPad上顯示，讓我一目了然，具體地了解自己的健康情況。若有需要，職員會上門為我抽血、取小便樣本，又有專車安排我前往醫院檢查骨質疏鬆、耳鼻喉等。有了這種服務，我對自己的健康大為放心，不再疑神疑鬼，不用過度擔心癌症復發。那粒胃藥我也不用服食了，接受自己的腸胃情況是大腸手術後的正常現象，正如當初護士所說的。我的大腸癌快五年了，朋友都為我高興。現在我每日只需要食一粒血壓藥，開心地生活見朋友就是了。

我衷心多謝NHS對病人提供免費服務，又為獨居長者提供這樣好的服務，以免患病、失蹤和跌倒無人知道。希望更多長者受惠於DRI的研究項目和成果，詳情請看以下網站
<https://www.imperial.ac.uk/uk-dri-care-research-technology/>

 UK Dementia Research Institute



隨著生活成本上升，長期承受壓力和倦怠的人數也在增加。

職業倦怠是一種由長期工作壓力引起的「職業現象」，不屬於醫學病症。當事人到了別無選擇的地步，經常掙扎於停下來和恢復工作。

根據“Mind”的指南，圍繞工作和生活平衡的三個跡象，與廣泛的慢性壓力跡象相關：

- 1) 能量耗盡或疲憊的感覺。
- 2) 心理上，自己與工作的距離增加，與工作相關的消極感受或憤世嫉俗的情緒加劇。
- 3) 專業效能降低。

基於證據的改進技術包括：睡眠、體育鍛煉和正念的減壓。專家還建議與他人在一起或活動，例如：具創造性的嗜好、心靈操練、置身於大自然中，以及富有想像力的時間。

https://patient.info/news-and-features/what-are-the-symptoms-of-burnout?xnp_e_tifc=bD4_hlQLhIndbuhsOFVphypJRfn-OIUu4.sNbdHAbIh



癌症月會 MCSG

您，並不孤單！

我們是您抗癌路上的同行者，歡迎癌症病友、家屬、照顧者和朋友。大家分享近況，互相關懷，祝禱支持。

每晚能入睡，早上醒來有精神，是大腦的成就。

每次吃完飯舒服，不吐不嘔，是口和胃的成就。

每次排便通暢，無便秘無肚瀉無失禁，是大腸和肛門的成就。

每次排尿通順，無刺痛無血尿無遺尿，是腎和膀胱的成就。

每天行完當行的路，是雙腳的成就。

每天活著，不是必然的成就！



美景月會（粵語）28/2（週二）2pm-4pm

24/1 16 人參加聚餐，互相支持。

Maggie Centre, Charing Cross Hospital,
Fulham Palace Road, W6 8RF



蘇豪月會 11/2（週六）11am-1pm

14/1（週六）1-3pm 16 人參加，互相支持

SOC, 166A Shaftsbury Ave, SOC WC2H 8JB



美倫月會（普通話）16/2（週四）11am-1pm Zoom

領袖學院

張陳麗娟

2020年3月，在新冠疫情爆發下，英國可能隨時宣報封城。NHS的Leadership Academy「領袖學院」按報名者用電動投票的決定，如期進行3月5日在Leeds總部的座談會。如以往的安排，大會提供免費交通和住宿。前一晚六時我到達酒店，翌日早上九時到達會場，已有五十多名來自全國的出席者，包括NHS職員、退休人士、慈善機構職員、病人等。各人的少許貢獻對NHS的未來卻大有不同，可惜我仍然是唯一的華人出席者！癌友A生的爭扎在我腦海中。所以我提出：「若A&E醫生能夠為疑似癌症病人安排取活組織和PET，不是等安排了專科門診後才可以有此類檢查，那麼確診癌症就可提早兩週。NHS豈不是經常宣傳儘早確診，立即治療，較佳預後！」

2022年NHS的EGA GMTS項目，聘請了50名來自不同專業背景的研究生，研習兩年以改善日後NHS的發展。十月舉辦首個研習課題，是「傾聽病人和照顧者的故事」，我是三位獲邀的病人之一。導師鼓勵我暢所欲言，表達二十多年來的求診和治病經驗，不論好與壞。一個小時後，坐在我旁邊的研究生說：「我們會針對你所說的，希望日後的醫護不再有相同的壞劣情況出現。」導師做總結，謙虛地問：「你作為病人，最重要的是甚麼？」

「醫生願意聆聽的態度給予病人安全感，令病人樂意合作，對治療有信心。」隨後半小時是三組匯報，重點是從接受護理者的角度著想。其他兩組的病例都是獨特的，有別於我的經驗。NHS講求的未來發展，是客觀的，也是以病人為中心。

「領袖學院」在2012年成立，使用證據影響未來的改變，令NHS改善醫療保健的文化和服務。主辦單位不斷強調醫生們是學術上的專家，但病人是自己經驗上的專家。我在以往的會議中認識了白人M女士，25年來她是「專業病人」，患病包括類風濕性關節炎、子宮癌、失去聽力，正等待更換膝蓋。滿頭白髮的M女士實在令我敬佩，12年來她一直擔任病人代表，期望改善急症室服務。我的護士背景助我更欣賞NHS領導層，以開放又謙遜的心態去傾聽和追求不斷改進。

<https://www.leadershipacademy.nhs.uk/programmes/elizabeth-garrett-anderson-programme/>

NHS
Leadership Academy

**ELIZABETH
GARRETT
ANDERSON**
PROGRAMME



CACACA January 2023 Finance Report

December Balance	£	33,400.41
January Income	£	243.44
January Expenses	£	19.20
January Balance	£	33,624.65

Monthly Cancer Support Group (MCSG Soho)

Second Saturday of each month • 11:00 am – 1:00 pm
Soho Outreach Centre (SOC), 166A Shaftsbury Avenue, London, WC2H 8JB

Patient's Story

Boris Cheung

In 2017, I had stage 2 bowel cancer and only needed an operation. The next year, my cancer spread to the liver, which was stage 4. In June, I was the first person to undergo the most advanced robotic minimally invasive liver cancer resection, which was videotaped. I had no discomfort and was discharged the next day. As a result of my cancer, I had the privilege to first visit my flat provided by the council. I had a double first! (See MCSG Newsletter 2.2019) After chemo, I had a lot of gas, which embarrassed me and affected my social life. I also felt like never emptied my bowel. The nurse explained that they were common side effects after colon surgery and I needed time to adjust. I tried to detect any possible metastases and contact the CNS for a referral asap. For example, I was referred to haematology for high bilirubin and low platelets. (See MCSG Newsletter July 2021)

During the two-year lockdown in London, I avoided going out as much as possible, apart from walking in the park and shopping for essential items. In 2021, the side effects of the Covid vaccine such as blood clots made me worried. Despite reassurance and encouragement from oncologists, CNS, haematologists, GPs, friends, church pastors and volunteers, I never received a vaccine, nor got infected. Every day at dusk, I wrote on my calendar "Thank you Jesus that I am safe and healthy" and I enjoyed my daily life as usual. By 2022, in the elderly home with 25 units I live in, about 1/7 of the residents had no vaccine and no one had been infected. I received the flu and the pneumonia vaccine recommended by my GP.

In early 2022, a resident disappeared and the office called the police when they did not see him on the CCTV. The police asked the neighbours about the person's whereabouts. He was finally found in the hospital a week later suffering from Alzheimer's and having mobility problems. Since then, a DRI staff member visited him, fitted him with a satellite tracking watch and invited me and other residents to join their research project for two years. I had WiFi and can speak a little English, so I could

participate. I soon received a free digital blood pressure monitor, digital scale and iPad, and several sensors were installed on top of my door, bedroom, kitchen and toilet. Their staff called weekly to check on my urination, bowel movements, sleep, appetite and activity, similar to the GP's weekly consultation. My blood pressure, weight, BMI and other information are displayed on my iPad and I have a clear picture of my health. If necessary, the staff will home visit to take blood and urine samples and arrange transport for my hospital tests for osteoporosis and ENT. With this service, I feel much better about my health and no longer worry much about metastases. I don't take the stomach pills anymore and accept that my bowel condition is normal after colon surgery, as the nurse said in the beginning. I have been living with cancer for five year and my friends are happy for me. Now all I need is one blood pressure pill a day to live happily and meet my friends.

I would like to thank the NHS's free service for cancer patients and the good service for the elderly who live alone, maybe sick, going missing or falling without anyone knowing. I hope that more elderly people will benefit from DRI's research projects

<https://www.imperial.ac.uk/uk-dri-care-research-technology/>  UK Dementia Research Institute



As the cost-of-living rises, so does the number of people having chronic stress and burnout. **Burnout** is not classified as a medical condition but an 'occupation phenomenon' resulting from chronic workplace stress. People with burnout often struggle to stop and recover, but they get to a point where they have no choice.

According to a guide by 'Mind', three signs around work-life balance correlate with broader signs of chronic stress:
 1) Feelings of energy depletion or exhaustion.
 2) Increased mental distance from one's job, or feelings of negativism or cynicism related to one's job.
 3) Reduced professional efficacy.

Evidence-based techniques of improvement include sleep, exercise, and mindfulness-based stress reduction. Experts also recommend being with others or activities e.g. creative hobbies, spiritual practice, being in nature, and imaginative time.

https://patient.info/news-and-features/what-are-the-symptoms-of-burnout?xnpe_tifc=bD4_hIQLhIndbuhsOFVphpyJRfn-OIUu4.sNbdHABlh



MCSG is open to individuals touched by cancers.

It aims to give support and strength to patients, survivors, family, friends and carers.

Let us move forward together.

It is important to know that none of us is alone!

Sleeping every night and waking up refreshed in the morning is the achievement of the brain.

Feeling comfortable after **each meal**, without vomiting or nausea, is the achievement of the mouth and stomach.

Having a smooth **bowel open**, without constipation, diarrhoea, is the achievement of the lower digestive system.

Urination without pain, blood or leaking, is the achievement of the kidneys and bladder.

Walking every day is the achievement of the feet.

Living every day is not a necessary achievement!



MCSG Maggie 28/2 (Tue) 2pm-4pm

24/1 16 people joined the meal
 Maggie Centre, Charing Cross Hospital,
 Fulham Palace Road, W6 8RF



MCSG Soho 11/2 (Sat) 11am-1pm

14/1 (Sat) 1-3pm 16 people supported each other
 SOC, 166A Shaftsbury Ave, WC2H 8JB



MCSG Macmillan 16/2 (Thurs) 11am-1pm Zoom

Leadership Academy

Naomi Cheung

In March 2020, there was a possibility of a Covid lockdown. The NHS Leadership Academy carried out the event on 5/3 as scheduled, decided by applicants in a vote via email. As a usual practice, free transport and accommodation were provided. I arrived at the hotel at 6 pm the night before. By 9 am the next morning, there were already over 50 attendees from across the country, including NHS staff, retirees, charity workers, patients etc. It was a shame that I was still the only Chinese person, as each person's small contribution made a big difference to NHS's future! Mr A's cancer experience stuck in my mind. So I said, 'If A&E doctors could arrange for biopsies and PET for suspected cancer patients, instead of waiting for specialist outpatient appointments, then the diagnosis of cancer would be confirmed two weeks earlier, matching NHS's promotion: early diagnosis, immediate treatment and better prognosis!'

In 2022, NHS's EGA GMTS project recruited 50 postgraduate students from a range of professional backgrounds for a two-year study to improve NHS's future. In October, I was one of the three patients invited to the first workshop on 'Listening to the stories of patients and carers'. I was encouraged to speak freely about my 20 plus years of experiences, the good and bad. After an hour, the student sitting next to me said, 'We will address what you have said and hope that the same bad situation will not occur in future healthcare.' Before concluding, the tutor

asked humbly, 'What is your priority as a patient?' I replied, 'The doctor's willingness to listen gives the patient a sense of security and makes the patient willing to cooperate and confident in the treatment.' The next half hour was devoted to three groups of presentations from the perspective of the person receiving care. The other two case studies were unique and different from my own experience. The NHS is about a future that is objective and patient-centred.

The Leadership Academy was set up in 2012 using evidence to influence change and improve the NHS's culture and delivery of healthcare. The organisers continue to emphasise that doctors are the academic experts, but patients are the experts in their own experience. I met a white woman Ms M at previous meetings, who has been a 'professional patient' for 25 years, suffering from rheumatoid arthritis, uterine cancer, loss of hearing and waited for a knee replacement. With her grey hair, I was in awe of Ms M who has been a patient representative for 12 years to improve the A&E service. From my nursing background, I appreciate the open and humble mindset of the NHS leadership to listen and to improve.

<https://www.leadershipacademy.nhs.uk/programmes/elizabeth-garrett-anderson-programme/>

