

# NEWSLETTER

- October - 23°C
- Optimistic October
- RSCH / St. Luke's Open Day
- Christmas Party
- Webinar - Ati - Journey to Sleep
- Non-Melanoma Cancers
- Buddies report
- Halloween
- And more.....

## October - 23°C

It feels very strange reminding people of the 5 Ss at this time of year, but make the most of it - **Get out & About!**



### Surrey days out

- Visit Polesden Lacey
- Walk around Hatchlands Park
- Get lost in Hampton Court Maze
- Get your adrenaline level up in Thorpe Park
- The sparkling grotto of Painshill Park
- Visit the The Royal Botanic Gardens at Kew
- Explore Leatherhead and the Surrey Hills
- Wander around the streets of Guildford
- Taste wine at the Denbies Wine Estate
- Relax at the Runnymede on Thames Spa
- Visit Reigate
- Go paddleboarding

### West Sussex days out

- Fishbourne Roman Palace and the Cathedral, Chichester
- See the animals at Knepp Safaris, Horsham
- Day of sun on West Wittering Beach
- Walking in the South Downs National Park
- Relax on East Beach, Bognor Regis
- Learn about Nymans, Handcross
- Go to Gatwick Aviation Museum, Crawley
- Explore Arundel Castle
- See racing at Goodwood House, Chichester
- Relax in Tilgate Park, Crawley
- Get close to nature in Buchan Country Park, Crawley
- See the birds at Huxley's Birds of Prey Centre, Horsham

### Hampshire days out

- Walk and eat your way round Brockenhurst
- Cycle through Lyndhurst before Afternoon Tea
- Drink coffee in Southsea, and lay on the beach
- Visit Portsmouth Historic Dockyard and Gunwharf Quays
- Go for a day out in Winchester
- Cycle or walk the South Downs
- Get adventurous in the New Forest
- Day out in Southampton
- Relax on Hayling Island
- Go to Highclere Castle in Newbury
- Visit Queen Elizabeth Country Park in Petersfield
- Drink at Hambledon Vineyard
- Visit Mottisfont National Trust property
- Chill at Hill Head Beach in Fareham
- Visit Titchfield Abbey
- Relax at Chewton Glen Spa

### Berkshire days out

- Legoland Windsor
- Ascot Racecourse
- Windsor Great Park
- Basildon Park, Reading
- Lapland UK, Winkfield Row
- BCA Zoo
- Go Ape, Bracknell
- The Living Rainforest, Thatcham
- Day out in Bray
- Reading Museum
- Dinton Pastures Country Park, Wokingham
- Museum of English Rural Life, Reading
- Colne Valley Regional Park
- Day at Windsor Castle



# Optimistic October

Actions to help you focus on what really matters.

Optimistic October 2023



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1 Write down three things you can look forward to this month	2 Find something to be optimistic about (even if it's a difficult time)	3 Take a small step towards a goal that really matters to you	4 Start your day with the most important thing on your to-do list	5 Be a realistic optimist. See life as it is, but focus on what's good	6 Remind yourself that things can change for the better	7 Look for the good in people around you today
8 Make some progress on a project or task you have been avoiding	9 Share an important goal with someone you trust	10 Take time to reflect on what you have accomplished recently	11 Avoid blaming yourself or others. Find a helpful way forward	12 Look out for positive news and reasons to be cheerful today	13 Ask for help to overcome an obstacle you are facing	14 Do something constructive to improve a difficult situation
15 Thank yourself for achieving the things you often take for granted	16 Put down your to-do list and do something fun or uplifting	17 Take a small step towards a positive change you want to see in society	18 Set hopeful but realistic goals for the days ahead	19 Identify one of your positive qualities that will be helpful in the future	20 Find joy in tackling a task you've put off for some time	21 Let go of the expectations of others and focus on what matters to you
22 Share a hopeful quote, picture or video with a friend or colleague	23 Recognise that you have a choice about what to prioritise	24 Write down three specific things that have gone well recently	25 You can't do everything! What are your three priorities right now?	26 Find a new perspective on a problem you face	27 Be kind to yourself today. Remember, progress takes time	28 Ask yourself, will this still matter a year from now?
29 Plan a fun or exciting activity to look forward to	30 Identify three things that give you hope for the future	31 Set a goal that brings a sense of purpose for the coming month				

ACTION FOR HAPPINESS

Happier · Kinder · Together



To view copy and paste the link below into your browser.

<https://youtu.be/mznP0vcPTIk>





# NEWSLETTER



Derrick, Pam & Chris promoting MelaNoMore at the St. Luke's Cancer Centre as part of the RSCH Community Open Day.



Aga and Anne promoting the RSCH Cancer Voice



Lots of pitches on the day including Fountain Centre, The Brigitte Trust, ON-CIO. Action for Carers, Macmillan, Mind Matters, OK to Ask and more.....







## MelaNoMore Christmas Party



It is nearly that time of year again, and we have organised our Christmas party!

Please put **Tuesday 5<sup>th</sup> December** in your diary!

We are planning for an even better turnout than last year, as we have been able to secure a fabulous venue – the Garden Suite of the stunning Gorse Hill Hotel in Hook Heath, Woking.

As well as a delicious three-course meal in great company, we can promise a really interesting talk from the national charity, Melanoma Focus.

All members are welcome and encouraged to join us, with a guest, for a heavily discounted fee of £15 per person.

There will be a formal seating plan, so you will need to confirm your attendance and select your menu.

The committee are busily ringing round the membership at the moment. If you haven't been contacted yet, and would like to come along, please email [group@melanomore.net](mailto:group@melanomore.net) and we will be in touch.

We very much hope you will be able to join us for what promises to be a great evening.



MelaNoMore is inviting you to a Well-being Webinar. We shall also be sharing this Webinar with Ati's Community. Please note the revised start time, which we learned at our recent BBQ was the preferred time for many. So, we look forward to welcoming many on the day.

Join Zoom Meeting

<https://us02web.zoom.us/j/87587371050?pwd=ektCYzZYMVNVdFZnS2RlZUllWGtFdz09>

Meeting ID: 875 8737 1050 Passcode: 677216



**We are delighted to welcome Atifa Ismailmiya-Balding (Ati). Ati is a human first. She loves sharing her self-care practises with others—it's her favourite way of supporting the human journey.**

**Please Join us at the Well-being Webinar on Wednesday 11th October at 7.00 pm With Guest Speaker, Ati, guiding us through the "Journey to Sleep"**

Ati is an experienced integrative Counsellor & Psychotherapist, mindfulness coach and meditation teacher, Clinical Hypnotherapist and EFT (tapping) advanced therapist, yoga teacher, qualified in Vietnamese facial reflexology and trained in EMDR and NLP practices. Ati is an eco-therapist and loves running sessions in nature which she believes is the biggest healer. Ati uses colour as part of the therapeutic process.

Ati had a hysterectomy 6 years ago followed by life threatening bilateral Pulmonary Embolisms (blood clots). She believes incorporating self-care into her life; from small acts of self-compassion to working on boundaries has supported her through this transition.

She will be sharing gentle and soothing techniques to help with your sleep journey.

It will be a combination of mindfulness, meditation, self-care and some tapping (emotional freedom technique) with guided self-massage and gentle release techniques.

You do not need to be proficient in meditation or mindfulness to attend.

Ati encourages you to build a comfortable nest to rest in and this isn't talking therapy so you won't have to talk. She will also be available after the session to anyone that would like a check in.

It is also suggested that you play some soothing music and Ati has provided a Spotify playlist which can be found at the Spotify address below. If you are using the playlist, please do play it from a separate device. She will let everyone know when to press play. Please note that anyone who does not have a Spotify account can set one up easily before the event, free of charge (no credit cards involved). Probably, best to set it up on your phone if you are not using it to log-in to the session.

For more information on what Ati does you can find her at: [www.surreyhillswellness.co.uk](http://www.surreyhillswellness.co.uk) or Instagram @surreyhillswellness

<https://open.spotify.com/playlist/2JCVasNCNpWjqPQ77Pi30e?si=2AViBaW5QraSeAnffa-fzA>



## *News From The World of Melanoma*



We tend to focus our items on Melanoma as it is the most serious of all skin cancer types, but this month we will focus on non-melanoma cancers. The term non-melanoma distinguishes these more common types of skin cancer from the less common skin cancer known as melanoma. The following information is taken from Macmillan, NHS and Cancer Research UK websites.

### About types of skin cancer

The different types of skin cancer are named after the type of skin cell they start from. There are three main types of skin cancer:

- basal cell carcinoma (BCC)
- squamous cell carcinoma of the skin (SCC)
- melanoma.

BCCs and SCCs are different from melanoma. They are called non-melanoma skin cancers.

### The skin and skin cells

The skin does many things. It:

- protects the body from injury and infection
- helps to control body temperature
- helps to control fluid loss
- gets rid of waste substances through the sweat glands.

The skin is divided into 2 main layers. The outer layer is the epidermis and the layer underneath is the dermis. Below these is a deeper layer of fatty tissue.

The epidermis contains several types of cells. Most of the epidermis is filled with cells called keratinocytes, also called **squamous cells**.

The lowest layer of the epidermis is called the basal layer. It contains rounder cells called **basal cells**.

The basal layer also contains skin cells called **melanocytes** which produce melanin. Melanin gives skin its natural colour.

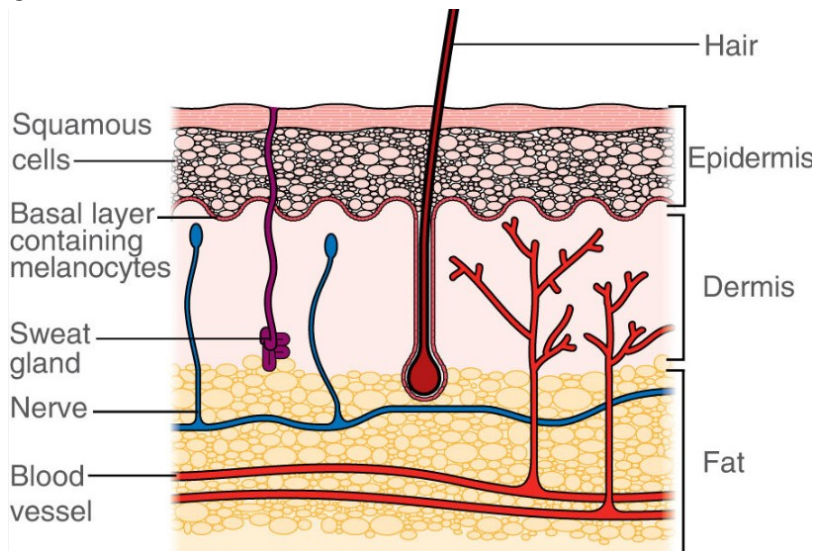
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## News From The World of Melanoma

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### Basal cell carcinoma (BCC)

BCC is the most common type of skin cancer. About 80 in 100 (80%) of skin cancers diagnosed in the UK are BCCs. It starts in the basal cells in the bottom (basal) layer of the epidermis. BCCs are sometimes called rodent ulcers.

BCC usually appears as a small, shiny pink or pearly-white lump with a translucent or waxy appearance. It can also look like a red, scaly patch. There's sometimes some brown or black pigment within the patch.

The lump slowly gets bigger and may become crusty, bleed or develop into a painless ulcer.

Most BCCs are very slow-growing and very rarely spread to other parts of the body. The treatment you have depends on how well the skin is likely to heal afterwards. Nearly everyone with a BCC who has treatment is cured.

A small number of BCCs may come back in the same area after treatment (local recurrence). Occasionally, BCCs grow more quickly. If left untreated they may spread more deeply into the skin and sometimes to the bones.

### Squamous cell carcinoma (SCC)

Squamous cell carcinoma of the skin is sometimes called cutaneous squamous cell carcinoma (CSCC). It is the second most common type of skin cancer in the UK. It develops from the squamous cells, which are in the outer layer of the skin.

SCC appears as a firm pink lump with a rough or crusted surface. There can be a lot of surface scale and sometimes even a spiky horn sticking up from the surface. The lump often feels tender when touched, bleeds easily and may develop into an ulcer.

Most people treated for SCC of the skin are completely cured. Usually, SCCs are slow-growing skin cancers. If left untreated for a long time they may spread to other parts of the body such as the lymph nodes. Sometimes they can grow more quickly and spread at an earlier stage.

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## News From The World of Melanoma

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### **Bowen's disease**

Bowen's disease is a precancerous form of Squamous cell carcinoma SCC sometimes referred to as squamous cell carcinoma in situ. It develops slowly and is easily treated. They are cancerous cells in the very outer layer of the skin. They grow very slowly and are unlikely to cause a problem in most people.

The main sign is a red, scaly patch on the skin that may itch. It most commonly affects elderly women and is often found on the lower leg. However, it can appear on any area of skin. Treatment could take the form of creams, photodynamic therapy, cryotherapy, curettage and electrocautery, surgery, laser treatment, radiotherapy or observation and monitoring.

Although not classed as non-melanoma skin cancer, Bowen's disease can sometimes develop into SCC if left untreated.

**Rarer types of non-melanoma skin cancer** (Less than 1% of all skin cancers in the UK are these rarer types of skin cancer).

### **Merkel cell carcinoma (MCC)**

Merkel cell carcinoma (MCC) is a rare type of skin cancer. It starts in the Merkel cells, which are usually in the top layer of the skin (the epidermis). These cells are near the nerve endings and they help us respond to touch.

MCC is very rare. Just over 1,500 people were diagnosed with MCC in England between 1999 and 2008. MCC usually appears as lumps on the skin. The lumps are often bluish red in colour and less than 2 cm across, although they are sometimes larger. The skin over them is usually firm (not broken) and they don't hurt. Treatment is with surgery or radiotherapy, or both. This usually works well, but sometimes the cancer can come back in the same place. And sometimes it spreads to nearby lymph nodes or to other parts of the body.

### **Kaposi's Sarcoma (KS)**

Kaposi's sarcoma (KS) is a type of soft tissue sarcoma that usually affects the:

- skin
- lining of the mouth.

It rarely affects organs inside the body, such as the lungs, liver, stomach, bowel or lymph nodes. It can develop in several parts of the body at the same time. The first symptom of Kaposi's is usually a coloured spot on the skin (skin lesion). Kaposi's sarcoma skin lesions can range in colour. They may be pink, brown, brown-red or reddish purple.

The lesions can appear as a:

- flat area on the skin – called a patch
- slightly raised area – called a plaque
- raised bump – called a nodule.

The lesions can develop anywhere on the skin, including inside the mouth. They are more commonly seen on the legs, face and groin area.

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## News From The World of Melanoma

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The lesions may develop quickly. Although there may be a single lesion at first, it is possible for more than one to appear. The lesions can join together to make a bigger tumour in several parts of the body at the same time.

Kaposi's sarcoma is a rare condition. It's often associated with HIV but also occurs in people who don't have HIV. It's a cancer that starts in the cells that form the lining of lymph nodes and the lining of blood vessels in the skin. Treatment for early diagnosis is usually immunotherapy cream. For later diagnosis surgery or radiotherapy, and sometimes chemotherapy.

### T cell lymphoma of the skin

T cell lymphoma of the skin can also be called primary cutaneous lymphoma. It's a type of non Hodgkin lymphoma. There are a number of different types of treatment for this type of cancer.

Lymphoma is cancer of the lymphatic system.

The lymphatic system is a network of thin tubes and lymph nodes that run throughout the body. Lymph nodes are bean shaped glands. The thin tubes are called lymph vessels or lymphatic vessels. Tissue fluid called lymph circulates around the body in these vessels and flows through the lymph nodes. The lymph contains a high number of white blood cells (lymphocytes) which fight infection.

When you have lymphoma, some of your lymphocytes don't work properly. They start to divide constantly but don't develop fully. So they can't fight infection as normal white blood cells do.

There are 2 types of lymphocytes or white blood cells:

- T cells
- B cells

In cutaneous lymphoma the T cells or B cells grow out of control within the skin. There are 2 main types of skin lymphoma:

- cutaneous T cell lymphoma (CTCL) starts in the T cells of the skin
- cutaneous B cell lymphoma (CBCL) starts in the B cells of the skin

CTCL is the most common type of skin lymphoma. It causes flat red patches on the skin that look like eczema and can be itchy. Several parts of the body can be affected.

CBCL is a more unusual type. People tend to have lumps on their skin in 1 or 2 areas, rather than affecting all of the body.

CTCL more commonly affects people aged 60 and over and is more common in men than women. There are different types of CTCL. The most common are called mycosis fungoides (MF) and Sézary syndrome.

Doctors usually use treatments to treat the skin directly when cutaneous T-cell lymphoma (CTCL) is at an early stage. These include creams, light therapy and radiotherapy.

Sometimes treatments that work throughout the body are used. These treatments may be given as tablets, or as an injection into a vein or under the skin. They are then carried in the blood to all areas of the body.

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## ***News From The World of Melanoma***

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### Soft Tissue Sarcoma

A soft tissue sarcoma (STS) is a rare cancer. It can develop in the cells of tissues that support, connect, surround and protect the organs in the body. These tissues include:

- fat
- muscle
- nerves
- fibrous tissues
- tendons and ligaments
- blood vessels.

The most common areas for soft tissue sarcoma to start are the arms and legs. But it can develop anywhere in the body, including the:

- womb (uterus)
- stomach
- small or large bowel (intestines)
- area at the back of the tummy (abdomen) called the retroperitoneum
- skin
- head and neck.

Sarcoma is more common in people over 30. Certain types of sarcoma can develop in children and teenagers. The symptoms and treatment may be different from an adult with the same sarcoma.

Sarcomas can also start in the bone. This is called primary bone cancer. They grow differently from soft tissue sarcomas and are treated differently.

Sometimes it is hard to tell whether a sarcoma has started in soft tissue or bone. Some types, such as Ewing sarcoma, can start in either the bone or the soft tissue. Ewing sarcoma is most common in teenagers.

Soft tissue sarcoma can start in any part of the body. Often, they do not cause any symptoms until they start pressing on an organ, nerve or muscle. The main symptom of a sarcoma in an arm or leg is a lump or swelling that is:

- getting bigger
- bigger than 5cm (2in) – about the size of a golf ball
- painful or tender.

Most soft tissue lumps are not cancer. But if you notice any of these symptoms, get them checked.

A combination of Surgery, chemotherapy and radiotherapy are used to treat soft tissue sarcoma

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## MelaNoMore's Buddies and Friends

Join the conversation – we are looking for both “friends” and “buddies” to match together


“it is so good just to talk – we discuss all sorts of different subjects and have formed a real friendship”


**MelaNoMore Buddies**  
Let's talk

Whether you have just received your diagnosis, are undertaking treatments, still on the road to recovery, or a family member trying to make sense of it all, you may be feeling anxious, fearful, apprehensive. MelaNoMore is here to help. We cannot give medical advice, but we can give a listening ear and the chance to chat with someone who understands what you're going through.

A 2020 study of 100,000 Brits found that confiding in others appears to reduce the risk of depression by 21%

For further information: visit [www.melanomore.net/buddies/](http://www.melanomore.net/buddies/) or email: [melanomore.buddy@gmail.com](mailto:melanomore.buddy@gmail.com)





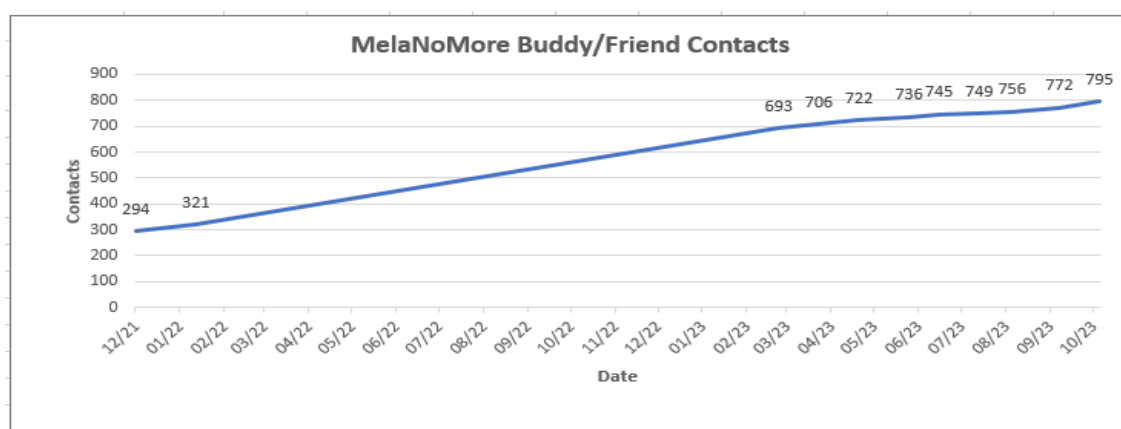
**Chris Caswell, Lead – MelaNoMore Buddies**

The MelaNoMore Buddies system continues to offer support via the Buddy / Friend one to one pairing. A Buddy, who perhaps has had more experience of the melanoma path and process, is paired with a Friend, who is possibly newer and in need of support and a listening ear.

This pairing offers support to share information, to discuss worries and concerns on a one to one basis, without the constraints of appointment time slots. This support pairing is away from the standard clinical appointments, on a more frequent basis, probably weekly or more.

Contacts are mostly by longer phone calls and interspersed with shorter ad hoc text or WhatsApp messages.

In over two years Buddies have been in contact with 28 Friends to give support, shared 766 phone calls, texts, WhatsApps or emails. There have also been a total of 29 face to face meetings, including MelaNoMore group gatherings at the Loseley Park in April '22, the Summer BBQ in August '22, the Christmas celebration at the Hogs Back Hotel in December '22 and the recent Summer BBQ in August '23. This gives a total of 795 support contacts since inception in October '20.



If you wish to join this support group, as either a Buddy or a Friend, please send an email to:

**[group@melanomore.net](mailto:group@melanomore.net)**



This page is for your contributions to the Newsletter. There are no limits on content.



## Halloween



The tradition dates back to the ancient Celtic festival of Samhain, 2,000 years ago

The Celts believed Samhain (pronounced sow-ain) was the day in the year when the gap between our world and the spirit world was blurred, making it easier for the spirits of the dead to return.

To commemorate the day, they would build huge bonfires, wear costumes and tell fortunes.

The Romans conquered much of the Celtic tribal lands when they invaded from mainland Europe in 43 AD, and over the next four hundred years of occupation and rule, they appear to have assimilated many of their own celebrations into the existing Celtic festivals. One such example may help to explain the current Halloween tradition of 'bobbing' for apples. The Roman goddess of fruit and trees was known as Pomona, and her symbol just happened to have been that of the apple. Over many years, as the Romans conquered much of Europe and Christianity spread into Celts lands, the traditions of these beliefs and cultures blended.

Eventually, the Christian festival of "All Saints' or "All Souls Day", otherwise known as All-Hallows, took over - the night before which is called *All Hallows Eve...* leading to the name, yep you guessed it - Halloween.

Trick or Treat began hundreds of years ago in medieval England, when people would go door to door offering a prayer or a song in exchange for food.

This was known back then as *Souling*, taking place on All Saint's Day when Christians would traditionally pray for their loved ones.

Approaching the Victorian era, the food often given was a type of pastry called a soul cake. Something resembling a biscuit, or a cake. Only in modern times has that tradition evolved into sweets and chocolate.

Costume wearing started with the Celts. Spooky outfits were worn to scare away any evil spirits lurking in the shadows of the celebrations.

The practice of carving faces into vegetables became associated with Halloween in Ireland and Scotland around the 1800s. Jack-o-lanterns originated from an Irish myth about a man nicknamed "Stingy Jack," who tricked the Devil and was forced to roam the earth with only a burning coal in a turnip to light his way. People began to make their own versions of Jack's lanterns by carving scary faces into turnips or potatoes and placing them into windows or near doors to frighten away Stingy Jack and other wandering evil spirits.

Pumpkins however... that's an American thing. It was brought over to the US by the Irish in the 19th century when many emigrated to America. Whereas back home they used to carve faces in turnips, they found pumpkins were easier to grow in America, so the tradition evolved to carving the pumpkins we are familiar with today. Creepy faces would be carved into the vegetable to scare away the mythical spirit called Jack.



We hope you enjoy this Newsletter. Please let us know or if you have, any suggestions for improvement or any articles you wish to publish. You can contact us on:

[group@melanomore.net](mailto:group@melanomore.net)





## MelaNoMore Vacancies

We continue to have vacancies on the Committee and are also in need of volunteers to assist the Committee with tasks or roles - such as:

- \*Website designer
- \*Deputy Newsletter Editor
- \*Membership Secretary
- \*Linked Site leads
- \*Committee members

If you are interested in helping out with any of these roles or wish to join the Committee, then drop a line to

**[group@melanomore.net](mailto:group@melanomore.net)**

Include your phone number and we will ring you back to discuss with you.

