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Speaker 1 ([00:05](#)):

A diagnosis of breast cancer can cause a life changing ripple effect of impact affecting those. We love the most and those upon whom we lean for comfort and strength in the most challenging of times, my name is Ash Hurley, and I'm the CEO of breast cancer Ireland. And you're listening to more than a lump, a podcast that talks openly and honestly, to a selection of guests about their very personal connection to breast cancer, be it through their career choice, their own firsthand experience of the disease, or through sharing the experience of close family members.

Speaker 1 ([00:40](#)):

My conversations enter on how breast cancer has informed their perspective on life, love family health, their goals, and indeed their aspirations. Although each story is utterly unique. The one common thread that runs through each one is that breast cancer is more than a lump D McDonough found a lump While in the shower. One morning in today's podcast, Dara tells a powerful story from a male breast cancer patient perspective, finding himself in the unfamiliar surroundings of the waiting room of the breast care center, feeling like something of an outsider amongst the women around him. Now a long time supporter of the work we do in breast cancer Ireland, he's helping us to raise the profile of the disease amongst the male population at large, as many people still don't realize this disease can affect anyone of any age, not just females Dara. You're very welcome to more than a lump. We're delighted to have you here with us today to share your story with our listeners. Take us back to that morning in the shower and the beginning of your breast cancer journey.

Speaker 2 ([01:42](#)):

The beginning of the journey Aisling was, as you say, in the shower, my morning shower and just washing myself. And my hand went across my breast and I found a significant lump. I thought nothing of it insofar as I didn't think cancer, I didn't think. I just thought it shouldn't be there. It wasn't sore. So I quickly forgot about it. And, uh, got dressed, went, went off to work. The next morning was the next time I thought about it because I felt it again. And I let it go for about three, four days maybe. And I said to myself that shouldn't be there and it was significant, not so, so I decided to make an appointment to see the doctor. I went to see my, uh, GP and he, I went in on a Monday and he told me that he could scan it. If I come back on Thursday, the technicians would be in surgery and he'd be able to do a scan, scan it to dub, which I did.

Speaker 2 ([02:49](#)):

Uh, he said more than likely is just a cyst and sent it up to Dublin. And about a week, two weeks later, I got word down from Professor Morris Stokes clinic that they wanted to see me again. I didn't think of breast cancer actually because, uh, no breast cancer that has never affected my family, my mum, my, my sisters, my aunts, nobody never heard of anybody having breast cancer. I knew breast cancer existed, but it was a woman's disease. So I did not think of breast cancer. I went down to Morris Stokes clinic and sat in the waiting room was called in. I wasn't really sure why I was there. Uh, apart from, I have a lump on my, on my breast. He said that he saw the scan and he wants to further investigate him and he wants to do a biopsy. So I had to go over to The Mater the following week and they did a biopsy. And at the same visit, they did a mammogram

Speaker 1 ([03:55](#)):

Interesting doing a mammogram on a man.

Speaker 2 ([03:58](#)):

It was, uh, was an experience. Okay, well, they, they mentioned a mammogram to me, uh, that they were going to do a mammogram. I, I didn't know it was an x-ray of the breast for cancer, but I knew it was something that women have done, men don't. So I went down and, uh, we did the, and uh, the next week, the next week I was back over to Mr Stokes' clinic again in the waiting room. And he called me in and that's the first time I heard it was breast cancer.

Speaker 3 ([04:34](#)):

And what did you feel like?

Speaker 2 ([04:37](#)):

I, it all felt surreal. I, it was very hard to take in because I mean, he may as well have told me I was pregnant because how can I be, how can I have breast cancer? I'm a man. I haven't got breasts, you know? And, uh, there was two, uh, breast care nurses there as well. They were introduced to me. And, uh, uh, one of them, I remember put a hand on my shoulder and then I turned around to Prof Stokes. I said, what are we going to do? My exact words assume? And his words back to me, he said, it has to come off. I says, we have to take your breast and your nipple. So I said, when when's this gonna happen? And he said, what are you doing next Thursday? That's exactly what he said to me. So I said, I guess I'm meeting you somewhere Prof. He said, right, seven o'clock, Thursday morning in The Mater. And, uh, seven o'clock Thursday morning I was in The Mater.

Speaker 1 ([05:44](#)):

Wow. And I tell me this, how did you feel when you were coming for your various appointments, whether it be with Professor Stokes or whether it was in The Mater in a waiting room predominantly with women

Speaker 2 ([05:58](#)):

The first time, I didn't really notice or think anything because breast cancer wasn't there. Like, I didn't know, but when I had the, the, uh, I didn't, and when I was in The Mater, I didn't think about it either, because very nervous I was going for the biopsy, which was very sore I'll I'll let you know. And then the mammogram was so I wasn't waiting that long. And I was, uh, I was very confused about what was happening, how, how can I have breast cancer? And, uh, but when I had the mammogram, sorry, when I had the mastectomy, I had to go back every week for about five or six weeks. Because when the, you have the mastectomy, there's a pocket left where they take the breast tissue out and this pocket fills up with, with fluid. So every Friday, and, and it fills up with fluid and you end up with a, a, a small boob.

Speaker 2 ([06:58](#)):

So every Friday I had to go back in to get it drained, uh, into Morris Stokes office. And it's, then that I was sitting in the waiting room. And, uh, I knew why I was there. And I realized everybody in here has breast cancer. You know? And then I noticed that, uh, people wouldn't sit beside me, people wouldn't, they wouldn't look at me. Uh, a lot of them, uh, would sort of turn away from me. Now, I, I know now why as in, uh, they must have been absolutely terrified, terrified for themselves. And then wondering why doesn't that man, wait in the car for his partner, because I'm sure the vast majority of them like me, men and breast cancer, it doesn't happen. But I'd say, I know now, like they must be absolutely devastated.

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They're either going for the mastectomy or they're after having it. And now I know, like to be okay, uh, I've no right. Nipple, I very badly scar breast and all that. I'm a guy does not bother me, but, uh, I really started thinking of a lot about those women in the waiting room, as in what they're going through.

Speaker 1 ([08:28](#)):

Yeah, absolutely. And they are consumed by fear.

Speaker 2 ([08:31](#)):

Oh, absolutely. Yeah, absolutely. My first time in there wasn't fear because I didn't know why I was there. I really didn't know why I was there. And then the, for the five weeks after what was back in his waiting rooms, I already had the mastectomy. I had it all done. Uh, I had, I had a two week wait after the mastectomy, he took the lymph nodes out. He explained to me that the cancerous, the tumor, which is the lump, it erupts, the cancerous cells leave it. And they go, they go to the lymph nodes. Cause that's the vehicle that they use, the lymph fluid, they join the lymph fluid and that's how to get around the, the body. So he explained that to me. And he explained to me, he took lymph nodes out and he was going to test them because they leave a trace when they go through the lymph nodes, the cancer trace. So he explained all this to me when I was in the hospital, after the mastectomy. And I had a two week wait, which was pretty nerve wracking now, because at that stage I knew breast. I knew I had breast cancer. I knew I had the mastectomy. I started told me about the lymph nodes and I started to learn about what was happening. And yeah, I was pretty, I was pretty nervous.

Speaker 1 ([09:46](#)):

Did you do Dr. Google?

Speaker 2 ([09:48](#)):

Oh, of course I did.

Speaker 1 ([09:50](#)):

Oh dear.

Speaker 2 ([09:51](#)):

Of course I did. And

Speaker 1 ([09:54](#)):

That'll keep you awake at night.

Speaker 2 ([09:56](#)):

Yes. And I would highly recommend people don't go. There's nothing positive in it. Nothing, absolutely nothing.

Speaker 1 ([10:03](#)):

No, just lots and lots of, of fear,

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Speaker 2 ([10:06](#)):

Negativity, fear. I was, uh, I was done at if I had five years, I, I was lucky I was done at dust. Uh, very, very negative, but hu human nature. You just have to do it. You just have to do it.

Speaker 1 ([10:24](#)):

Yeah. Well you want to equip yourself with as much knowledge as you can and that is understandable. But as you say, the amount of inaccurate information and hysteria that Dr. Google can cause is horrendous.

Speaker 2 ([10:36](#)):

Absolutely. Very, very, very frightening as well. Very, very frightening. Yeah. But I got back to, uh, OCS clinic and, uh, he, uh, he said, Dar that didn't go through the lymph lymph nodes. And I knew when he told me that the reason why it didn't go through the lymph nodes is that I went to my doctor in Drana and he, you know, it was just

Speaker 1 ([11:02](#)):

Early detection

Speaker 2 ([11:03](#)):

If I had have left it. Now, there's one thing I will see about the tumor about the lump I shower every single morning I got off at work on Friday morning, I had a shark, got dressed, went to work. That tumor was not there. I know it wasn't. And on Saturday morning it was, that came up now again through Dr. Google. Apparently that cancer was in me for two or three years, but, uh, tumor itself, the lump was not there on Fri Friday morning. I know for a fact it wasn't. And on Saturday morning it was there and that's again, uh, two and a half, I mean, two and a half centimeter lump. It was a significant lump. It came up overnight.

Speaker 1 ([11:58](#)):

Yeah. And I suppose even for the listeners, you know, the statistics are one in nine women, but equally they're one in 1000 men who will be diagnosed with breast cancer. And I think for a lot of people, they don't realize, especially men that they have breast tissue in their chest wall and that it can, you know, your breast area, even with women, it goes right up to your collarbone. Yes. And right in under your arm. Yeah. You know, and that is the same for a man.

Speaker 2 ([12:21](#)):

Absolutely. Yes. You know, AB absolutely. I, well, I'm another man now who, uh, I didn't know, weed breast tissue. That's one thing Dr. Google told me cause then, but, uh, yeah, we all have, uh, we all have breasts

Speaker 1 ([12:37](#)):

And I know you are very passionate about raising awareness.

Speaker 2 ([12:41](#)):

I am actually because I'm living proof excused upon that. If you get this on time, it is so treatable. If you get it on time, it is so treatable. Uh, the people in, in, in, in, in the matter are excellence. They're professionals. They're, they're just my whole experience apart from the, the embarrassment and at the start, uh, in the, in the waiting rooms being the only man in a man's woman are a man, sorry, being the only man in, in, in, in a woman's world. Uh it's. It's so treatable. That is why I, I am so passionate about it. I know for a fact that if I had have left that, uh, I would've got secondaries, I would've had, that would the, the cancer cells would've went into the lymph nodes and would've traveled around the lymph, the body in, in the lymph fluid. And I would've got secondaries and best case scenario was chemotherapy. Right. You know, it's but it is so treatable. It really is. Yeah. I went into the hospital on Thursday. I was outta hospital Saturday. I was back on work on Monday.

Speaker 1 ([13:59](#)):

Wow. Tell me this. How did you tell your wife and children? How did you find that?

Speaker 2 ([14:05](#)):

Uh, how did I tell them? I just came. I came home from when, after them. I didn't tell them at the start because I didn't know what was happening after the mastectomy,

Speaker 2 ([14:24](#)):

After the mastectomy, I come back and I told, I told family that I had a mastectomy to see again, it was to see what the lump was. I still wasn't talking cancer. And then we, and Professor Stokes told me that I had breast cancer. I went back and, uh, I, I told my wife, my, uh, the kids are, are, uh, 17, 20 and 22. They're all in college. And they're all going through their own thing at that particular time. And I decided I'm not gonna tell 'em their dad has cancer, you know, because, uh, I just did want them worrying until, until I, I, uh, until I found out, had the cancer cells gone through the lymph nodes. If, if they went up to the lymph nodes, I would've told them I would've sat them all down and explained, look, this isn't looking good, but it's not the end. I mean, I can get chemotherapy. And hopefully if I do get at secondaries, it'll, it'll be, they'll be able to treat it and all that. So I decided I'd wait until I find until I find out if, if the cancer had gone into the, the lymph nodes before I'd mentioned cancer to them and it didn't. So, uh, I did tell them after, but

Speaker 1 ([15:49](#)):

I'd say they were shocked.

Speaker 2 ([15:52](#)):

Oh, AB absolutely. Yeah. They were shocked, but not shocked in so far as a man's got cancer shock. Hasn't their dad's got cancer, you know, that's, that was their shock. Whereas other people, friends of mine are, were shocked that a man got cancer,

Speaker 1 ([16:11](#)):

Breast cancer, breast cancer, I suppose look the most important thing as you Sayara is we everybody, man, woman, it doesn't matter. We all just need to be breast aware. We need to understand and know what's normal because like that you knew there was an abnormality when you share it on Saturday morning. Absolutely. Yeah. Yep. You know, and early detection is key. We talk about it all the time. You

know, trying to say to people, check yourself on a monthly basis. If you spot an abnormality, go straight to your GP because early detection is key.

Speaker 2 ([16:42](#)):

Early detection is key. Aisling. I mean, saying, check yourself once monthly. I, I would go further. I now, because I, I, I had breast cancer and, and, and my breast every morning when I'm having a shower, I check my left breast. I mean, it's so easy to do it, to take seconds, your hand up on, on, on your arm, down the, the side of your breast, across your, your, your nipple. You just feel around it with your, your fingertips. So, I mean, once a month, once a month. Okay. A major check. Yeah. And a visual check for, for, for the other. I mean, it's, it's more than just a lump, as you are promoting. There are so many others, uh, symptoms there that's right. But once a month, a major check, but every morning in the shower, you can do a quick, a quick feel a poke.

Speaker 2 ([17:37](#)):

Yeah. And I do now every morning, since, since that I have a good look. And, uh, as I said, I was just, I'm just so, so happy that I, I knew there was something on my body that shouldn't be there and I wasn't there before. And, uh, I didn't know what it was. So again, it's, uh, a red warning light on the dash of your car. If I go up in the morning and I saw that light on, I wouldn't keep driving the car for days or weeks, I'd be on the phone. Won't stray away to a mechanic. Can you come and fix this?

Speaker 1 ([18:11](#)):

Absolutely. And I think that's the key, that's the critical point is that people shouldn't dust it under the carpet. They need to go and have it explored rule everything out. You have to Tru trust your gut.

Speaker 2 ([18:22](#)):

Oh, absolutely. Absolutely. Yeah. It's so, so it, it, it is breast cancer is serious, but it, so treatable,

Speaker 1 ([18:30](#)):

It is when it's caught early, AB

Speaker 2 ([18:32](#)):

Has to be, once it's caught early, early, it is just so treatable. And that's the one thing that I, I have learned about it. And that's why I'm so passionate about it in, in, in, in that, uh, just go about it. How, how could you, I, I can't comprehend somebody leaving what I had because you couldn't miss it when, when you're showering and, uh, you couldn't miss, I, you, you couldn't leave that there for weeks or, or, or days, or weeks or months just, I couldn't anyway, because I knew it should be there. I knew there was some, something on co just assist. It was a cancerous tumor.

Speaker 1 ([19:14](#)):

Well, Tara, thanks a million for joining us. It's been a pleasure. And I think if we can take anything from today, it is that it is more than just a lump, but also it is so important to check yourself on a regular basis and understand the eight signs and symptoms that you need to be aware of.

Speaker 2 ([19:27](#)):

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Absolutely. Absolutely.

Speaker 1 ([19:29](#)):

Thanks a million. Thank

Speaker 1 ([19:32](#)):

The information in this podcast is based on the personal stories of those. We have chatted to. If you are concerned in any way, please contact your GP immediately, or you can contact us at breast cancer, ireland.com.