

Automated Transcription

A diagnosis of breast cancer can cause a lifechanging 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 Aisling 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 connections to breast cancer – be it through their career choice, their own first-hand experience of the disease, or through sharing the experience of close family members. My conversations will centre on how breast cancer has informed their perspective on life, love, family, health, their goals, and 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.

Care Plus is Ireland's leading community pharmacy brand, offering expert advice and services for a healthier and happier you. Find your nearest Care Plus on careplus.ie or follow them on social media for daily health and wellness tips.

Sorcha was just 22 years of age when following a routine visitor GP to get a prescription for the pill, she was diagnosed with an aggressive breast cancer that had spread to her lymph nodes. She admits she wasn't breast aware and thought the small lump on her left breast, which was about the size of a pea, was almost not worthy of a mention. Fortunately for Sorcha she did bring it to the doctor's attention who sent her on for referral to St. James' hospital. Sorcha joins me today to share her story and to remind us all that breast cancer is not just a disease that affects older women. She's passionate about telling young women in particular, took out for the signs and symptoms. Sorcha, Thank you so much for joining me here today and for taking the time to drive to Dublin from Cavan to share your important messages with our more than a lump listeners, you were only 22, the same age as my own daughter. When you felt that lump tell us what happened.

Speaker 2 ([01:59](#)):

So I had gone to my GP. Well, it was basically, I had found this lump the size of pea, like you said, I went to my GP, thought nothing of it didn't really think anything. Um, obviously for every six months you have to get your blood pressure taken so you can get your pills. So I went in and I had just said to her, look, listen, while I'm here, can you have a look at this? Um, and I had gone to this GP for years. So she was like, yeah, no problem. So she looked at it and she's like, just the precaution I'm gonna send you because anybody who presents themselves with a lump in the breast will have to go to a breast clinic. And she asked me which one was the most local to me. So I picked James's. Um, and she said, I'll send it off as like a non-urgent cuz they can do urgent or nonurgent in a case where they see fit.

([02:36](#)):

And obviously with me being 22, they really didn't think anything of it, which is fair enough. So I went off, um, and I went about my business and that would've been in the April and then it would've been about the start of August, end of July, that I would've had my appointment in James' I took a half day off work. Um, I went in and my mom came with me and before you go, they send you like a form of what's gonna happen and what you you do. So they said like, you'll see a consultant, you'll get a mammogram, you'll get an MRI and so on. So we went and we waited and we waited and we waited. And it was like, you were waiting for hours. You felt, it felt like hours, but it probably maybe was like two hours, um, went in and saw a registrar.

(03:15):

And she looked me over. And the time it had been from seeing my GP to going in here, it had grown from the size of a P to about size of a golf ball. So it massively grown. And I still naively was like, oh, it's nothing like, there's nothing. There's nothing. There didn't think anything of, but my mom had suffer with cysts before. So I genuinely thought that this was just gonna be something benign and nothing to worry about. And my friends and I had spoken about it while, so I was waiting and nothing really between my friends and I came up that it would be anything. And we were like a group of three girls and none of us would've said anything different. Um, and, and

Speaker 1 (03:48):

How were you feeling in yourself at

Speaker 2 (03:49):

That time? I was sick. I was prob like I was getting like chest infections. I was like vomiting. Like, and I like, I, I used to go out drinking. Like I worked Monday to Friday, I was working a fulltime job. I'd left my old job cause I wasn't feeling too well. So I left that. Um, and I was picking up like sicknesses, like no tomorrow, but I just thought like, know, it's just difficult. Like maybe like I'm not like looking after myself. I should be, I'm not taking my vitamins. Like I didn't really think anything of it. But I remember towards the end, I used to get darting pains through my chest that that would run up in through my breast. Um, and that was about maybe like a month before going to this appointment and I just thought, oh, I'm going to the appointment.

(04:26):

So I'll just say it there. Like it's why would I bother going back to my GP when I already have this appointment? Um, again, that was obviously a naive thing to think as well. Um, so I went to the appointment, waited, went in and the doctor looked at me and she did the whole thing and she's like, okay, well come back in eight weeks. And my mom was with me and my mom was a nurse. So she was like, no, she's like my daughter's 22. And she's coming to you with a lump that has grown. And then she's also getting daring pains through her breasts. Like I want her to be seen to today and on this form it says that like this will happen. And she was like, oh, that's only in like exceptional circumstances. And like this isn't, we don't see this as an exceptional circumstance.

(05:03):

So my mom was like, I wanna see the consultant who's on today. And as the reg was walking out the room, I'll never forget that she was like, I'm 99% sure that this isn't breast cancer. Wow. And the consultant came in, he checked me over and he said, I want you back tomorrow for a mammogram and I want you to an MRI. Yeah. And that was it. And that's kind of where I started. So then I went back to work. Didn't think anything of it again? I was still like, oh, it's fine. So I, I went back to work that day, came in the next day, took another half day from work. Did my mammogram horrific as well. <laugh> it is so painful. But you know, it is like, if anyone can do it, like, and that's another thing like mammograms, the like the, the age limit for a mammogram. I know it's what is it? 35.

Speaker 1 (05:46):

Well, it's no from 50. From 50. Oh, for the free breast

Speaker 2 (05:49):

Track. Free breast check. Yeah. Yeah. So like, that's another thing that I always think like, why are we doing it for, for the older generation? Like why is that? Not like even 30, I

Speaker 1 (05:57):

Suppose the issue is that for younger people. And it's something we constantly say to people is that from the age of 50, the reason why they, they adopt 50 is the age category is as you get older, your breast tissue turns from white into gray. Mm-hmm <affirmative> into dark gray, into black mm-hmm <affirmative>. So when you're in your eighties and nineties is black, but as you get older, the breast tissue off and it becomes, um, gray. Yeah. So the younger you are, your breast tissue is white. Cancer is white. So cancer is white on white. Very hard to detect. Okay. In a mammogram. Mm. But yet mammography is the standard and the best, um, imaging we have yeah. Available. It is really 90% is accurate. So, and younger people like you. Yeah. They will absolutely say we'll do mammogram. Yeah. And we will then very much do ultrasound to do an MRI. Yeah. To see where we

Speaker 2 (06:42):

Go from here. Yeah. So I would've done an ultrasound then as well, that day I had an ultrasound done as well. Um, and then they took a biopsy. Okay. So would've had the biopsy done, but again, I was like, oh, it's fine. Two weeks went past 17th of August. I went back out, my mom and my mom got the bus up, um, from Cal's because we would've been living in Calvin at the time. That's where I grew up for part of my life. So my mom was living there at my stepdad. And I remember she got the bus from Cal's and like every day we pass it, like if we ever pass it together, she'd be like, I'll never forget the day that I got the bus from there. I took another half day off work thing. And genuinely, this is how much I didn't think of it.

(07:15):

Like I just took a half day off work. I, I worked in town at the time and my mom met me in town and we both got the Lewis out to James' hospital together. And I waited. And it's funny because the more, I think back in it, now, everybody who had been called in prior to me was called in by the consultant. But when I came to me, I was called in by the breast nurse. Interesting. That's I clocked that after. I was like, that's because somebody has to be in the room when you get diagnosed, but I wouldn't have known that prior, but it was only after I thought about it. I was like, cuz everybody else was called in by him. Except for me, it was the breast nurse who I'm still very friendly with now and has been very, very good to me throughout my whole journey.

(07:52):

Lovely, lovely woman in James'. Um, so she brought me in and they do this whole small talk like, yo you're 22, you work here and this is where you live. And he just turned to me, he said, I'm really sorry. I'm diagnosed you with aggressive form of breast cancer. And I laughed and I said, you're joking. And he goes, I'm not. And I remember, I just was like, what? I remember looking at my mom or my mom's eyes were full of tears. And I was just like, what? I, like, I just couldn't comprehend it. Like, and then he said a few more things, but like, I don't remember anything. I remember though leaving there and going into the toilet in James's and like literally like leaning myself against the door and just like falling down crying. Cause I was like, what is going on? Like, like yesterday I was a normal 22 year old living in Dublin, working in Dublin, going out with my friends. And now today it's like, everything is different. Um, so

Speaker 1 (08:43):

Did they, did they tell you there and then the type of treatment plan you might be going

Speaker 2 (08:46):

On or no. So they kind of drip feed you the information to make it easier to absorb. So they would've given me that information, the 17th and I'm sure I maybe had the day out off after that. And then I would've been back up in the hospital, meeting my consultant again, and then they would've given us the, the process of how I'll go through my treatment plan. Um, I remember going home that night and I went back to my house in Dublin with my mom, packed up, whatever I thought I needed and went. And my mom drove us down to Cavan and I lived in Cavan from then on. And um, I remember my mom had to like ring my brother. Like, I'd be very close to my brother who now lives in, in Cavan, beside us. I remember my mom had to ring him and he came down and then I had a brother who lived in Toronto and I had a brother who lived in London as well. So my mom had to ring everybody and like, it's just heartbreaking as well. Like, and I think for my brothers who lived abroad, I think that was really tough for them because they couldn't be there. And I'm their baby sister. Like I'm the youngest, I'm the girl.

Speaker 1 (09:42):

I mean, it's unimaginable, you know, at 22 years of age that you'd have a sibling that's diagnosed. Yeah.

Speaker 2 (09:46):

Yeah. So then they told me, so that was a couple of days later. I can't remember the, the exact date, but they would've told me then a couple of days later, so you'll have chemotherapy and then we'll do surgery and then we'll do radiotherapy. So then two weeks later I started my chemotherapy. So on like the 30th of August, I was on my first round of chemotherapy. Wow. Um, and I had chemotherapy every week, every Wednesday. Um, for a couple of weeks, I think it was about 12 weeks. And I remember like for the first couple of weeks or the first two weeks you were, you were fine. Like it's until it builds up in your system. And then it was, um, I remember like I'd get chemo on a Wednesday. And by like this Saturday, I'd be feeling like somewhat, okay. Sunday you're okay. And then Monday, Tuesday, you're like, oh, I'm fine.

(10:28):

And then I'll come back again to Wednesday. So quickly back again and then you're back again. And then that faded, because then I got onto another round of chemo. So I was on two sets of chemo. Okay. Um, and then I did Herceptin as well. So I started that as well. Um, but yeah, I remember when it was coming down to like, I think I had done my second round of chemo. I was like, okay, well I'm gonna do it my hair, because I had asked, I'd asked all these questions. I was like to my oncologist. And he was like a man of my dad's age and these kids, my age. Um, and he was a lovely, lovely man. He's recently retired, but lovely man brought me through my whole journey. I got, I was very fond of him. Um, and I asked him like, will I lose my hair? And he goes, yep. You'll lose everything. Like everything. You're just gonna lose your eyelash. You use your eye eyebrow. He never beat around the bush. Yeah. Brilliant. He was so, so, so straight to the point with me and it was great cuz I needed that. Yeah. Didn't need someone to Marico me. Mm-hmm <affirmative> I just needed the information. Yeah. And then like I could deal with it myself. Mm-hmm <affirmative> um, but

Speaker 1 (11:23):

I, and for anyone that who, because we can't see you because we're on a podcast. Yeah. Would you have amazingly beautiful hair?

Speaker 2 (11:29):

<laugh> yeah. It's because it would've been a lot lighter. I'm like quite ginger and naturally, so it I've been a lot lighter to this as well. And I would've had this thickness and curly ginger hair and yeah. I remember thinking like, this is the only thing I have control over. I know. So let me deal with this, how I want to. So I went to a wig shop in town with my friend, my mom joshed me in. And I was like, I told her my story and I was like, you know, I'm gonna get my cut. And she's like, okay, well kind of do like a Bob first. And I sat there in the, in the mirror and I was like, nah, let's just, let's just cut it all off. And she's like, no, no, I think we should start. And I was like, no, no, no, I got it. Like, let's just shave it all off. So shaved my whole hair off

Speaker 1 ([12:04](#)):

In one,

Speaker 2 ([12:05](#)):

Go in one, go, I went from this. It probably would've been about the length of this to it being totally balded in one day. So shaved it all off and um, yeah, that's kind of, and then I got a wig and I didn't really wear the wig much. I wore a lot of head scarfs. That was kind of my thing. I wore a lot of head

Speaker 1 ([12:20](#)):

Scarfs. Yeah. A lot of times people often say that the wigs, whether they're too warm or they're itchy, so

Speaker 2 ([12:25](#)):

Itchy so hot. And you're just like, why am I bothered? People know I have cancer, I have no eyebrows or eyelash. It's like, who am I trying to kid here? So yeah. I, um, I opt offered the head scarfs. That was my thing.

Speaker 1 ([12:35](#)):

And then your treatment, you had a mastectomy of the left

Speaker 2 ([12:38](#)):

Breast. Yeah. So after chemo, so chemo would've ran until about, I think it would've ran through Christmas as well. And then I think I got about a couple of weeks off in January and then I had my first mastectomy on, in the February. So I did a, um, reconstruction on the day. So I was in theater for about nine hours. Um, and I remember coming out of it and I was like, oh my God, the pain, the pain is undescrivable. Um, and then it was two nights later. I got an infection in my implant. So I had to go back. I had to be rushed back into surgery on antibiotics, rushed back into surgery, implant, removed, washed, and put back in. I was in hospital for about three and a half, four weeks. That time it was tough. It was very, very tough. It was very

Speaker 1 ([13:18](#)):

Tough. Yeah. And the decision to have it immediately mm-hmm <affirmative> was yours or was it recommended to

Speaker 2 ([13:24](#)):

You? It was recommended, but I also think it was probably, they saw me as a 22 year old and I had just gone 23. I'm a December baby. So I had just turned the 23 and I had gone through, I was like going through chemo during my 23rd birthday, which is crazy to think like, so I

absolutely, yeah, I'd gone through it. Um, so I think it was maybe a joint decision, but I do think it was a lot to get my plastic surgeon consultant who was a female. Um, and my oncologist and my consultant, would've probably seen me as kids their own age and thought this is a lot for someone to deal with mentally, let alone then the physical aspect of it as well. So we did reconstruction on the day, which was great. And I had, um, an expander implant. So would've put in, would've been put in smaller and then you expand it with, with water. So I would've had it expanded every week or so in Dublin open, um, the plastic steam up in Dublin as well. Okay. Sort of had to do that too. Okay. Yeah. So,

Speaker 1 ([14:17](#)):

And then you went on then to have another your right.

Speaker 2 ([14:21](#)):

So I did my, I did my radiotherapy first, so I did 28 days consecutively of radiotherapy in Dublin as well. Um, and that was quite tough in itself as well because it, it, it would've burned. Like it burns your skin obviously because the the're ready therapy. So I did 28 full days of that. And then I would've gone back and I had my second mastectomy on my right breast

Speaker 1 ([14:41](#)):

Without any difficulty

Speaker 2 ([14:42](#)):

Without any difficulties. Okay. So I was in hospital probably for about a week, maybe just because it's such an intensive surgery. Yeah. And it's so harsh on your body. Like breast surgery in general is quite, is quite a hard one. So I think that it's just, it's, it's quite intrusive on your body. Um, but I recovered much quicker, much quicker on this one around because obviously it just wasn't. But on my first one, obviously they had taken out 28 lymph nodes on my breast that was obviously had the cancer. They took a 28 lymph nodes and this was after chemotherapy and three of those lymph nodes were still active with cancer. Yeah. So

Speaker 1 ([15:17](#)):

It was, had to happen. Had to happen.

Speaker 2 ([15:19](#)):

Yeah. And had I left it, maybe say the eight weeks at the right. Wanted me to leave? I dunno. Yes, exactly. Because it was, it was that aggressive. It was so aggressive and it was spreading. So it spread from my breast into my lymph nodes. Yeah. And I wanna just continue,

Speaker 1 ([15:31](#)):

Continue through the body. Mm-hmm

Speaker 2 ([15:32](#)):

<affirmative> yeah. If I hadn't have been caught. Yeah.

Speaker 1 ([15:33](#)):

And tell me, so, um, on the drugs that you've been on. Yeah. So, I mean, at 23 years of age, you are plunged yeah. Into early menopause.

Speaker 2 (15:43):

Yeah. So I would've gone on to Sodex, which is a hormone. Um, you injected into you and it shuts off your ovaries. Yeah. And then I was on, um, Tamoxifen, which I'm still on mm-hmm <affirmative>, it's another hormone, uh, based drug. So I was put into early menopause where I was getting hot flushes. I didn't have a period. I didn't have anything, nothing. Um, so that in itself was really hard to deal with because you're dealing with the side effects of coming off chemo. And then I was still on her for a year. So you were coming off that, and then you're still in the midst of dealing then with being in an early menopause. And I took 16 months off for this whole thing. And then I went back into work and I became, I went back into being a flight attendant after 16 months.

(16:26):

Wow. Yeah. So I went straight back into work. I just had like, I was like, I don't want like, be doing nothing anymore. Cause at that point you become, you're not sick anymore. Let's say because you're not feeling the side effects of the chemo. So in, in my head, because I was so young, I was like, I'm better. So now I wanna become my old self. Again. I wanna get back into the world. I wanna start working. I wanna start socializing. I wanna meet people again. I wanna live the life of a 23 year old or going on 24. Yeah. So I went back into work then, um, as a flight attendant for about a year and a half and I did a transatlantic and I was still on Tamoxifen. I was still on Sodex. I used, I remember I spent like, I used to have to, if my Sodex you'd have to give it every 28 days and never fell on a day that I was abroad. Like I used to throw into my suitcase, I freaking off me and give myself the Sodex injection while I was in like the us or Norway or wherever I was at the time. Gosh. But yeah. And then stuff.

Speaker 1 (17:21):

And at any, any point, did they, did your team talk to you about fertility and how would like, did they talk about freezing eggs or was your cancer, which I think it was so aggressive that really there wasn't time for that you had to start chemos right away.

Speaker 2 (17:35):

Yeah. There just wasn't time for it. They spoke about like, um, making an embryo, but like I was 22 and I remember just looking at them, looking at my mom and I was like, I'm not with anybody long term that I could think, yeah, I wanna have a baby with them. I'm like, I'm 22. So they said that, but then I couldn't freeze my eggs because from the time I was diagnosed, the time I first chemo was two weeks. So there was no time to freeze eggs. Yeah. There just wasn't that time. Um, wow. So still to this day, I don't know. And we don't know until I, if I wanna go get fertility testing or like I'm still on. So I just came off my Zoladex there about six months ago. My oncologist took me off at, after five years. Um, and I'm still on Tamoxifen and I could be on that for another five years. Yeah. We just don't know. It just depends on what my oncologist

Speaker 1 (18:18):

Is. Definitely. The research has shown in the last two years, at least mm-hmm <affirmative> well, while they used to say Tamoxifen was five, five years and you can come off, they're now saying 10 years. Yeah.

Speaker 2 (18:26):

Isn't much because I'm that younger, younger. They wanna like, obviously give me the best possible chance. Yeah. So, yeah.

Speaker 1 ([18:33](#)):

Wow. And you found love?

Speaker 2 ([18:35](#)):

I did lockdown love. Wow. <laugh>

Speaker 1 ([18:38](#)):

That's fantastic.

Speaker 2 ([18:39](#)):

Yeah. So I got with my fiance, um, just the started lockdown we met when I moved home to Clifton after losing my job due to COVID and he was working on the oil R so he had come home from the us and yeah. And we, we got together and we moved in a couple of months later. We both went back up to Dublin when co was kind of coming back to or leaving us. And we were coming back to Noel. We both moved up to Dublin and then we got engaged. Um, and then we just bought a house and we've got two dogs and two cats and the whole lot that fantastic. Great man though. Yeah. Yeah. He took it all.

Speaker 1 ([19:13](#)):

And I suppose as a young woman, yeah. Having been through the mill, mm-hmm <affirmative> having that conversation with a new partner must be difficult.

Speaker 2 ([19:21](#)):

Yeah. It is because he would've been, he would've been the only serious relationship. Let's say that I would've had posted Uhhuh. So to have that conversation with somebody and not know what way they're gonna take it is quite hard when you really, really love somebody. Mm-hmm <affirmative> um, I would've been quite honest from the very start because what's the point in waste anybody's time. If somebody doesn't want that, they don't want it. And I think physically as well, I would look different because of my reconstruction surgeries. So that's another thing that kind of will, would play into it too. So like having a new relationship and having a new partner and not knowing if I can have kids or what my fertility is. Like, you have to have these conversations from the start because what's the point in going the mill and then figuring out that I couldn't have kids or I can't, and then they might want it, but he took it all on the chin. He, he, yeah. He's, he's amazing. He took it all in the chin. Yeah.

Speaker 1 ([20:13](#)):

Yeah. And it was interesting. I remember you saying, you know, there you were this young, vibrant 22 year old living life, you know, uh, having great fun at the weekends, like every 22 year old, you know, getting yourself back into work on a Monday and then having to leave that kind of 22 year old life of party and fun and move back home.

Speaker 2 ([20:31](#)):

Yeah. So I moved home with my mom, my stepdad, and that was a big adjustment, but I'm sure it was a big adjustment for them as well. True. Yeah. Cause they would've shipped me off and they were living their life <laugh> and then I just landed back with my bag. So, but my mom was amazing. My mom was, I just, there's no words I can describe how good my mom was to me when I went through this, she, she brought me through everything. I wouldn't have done it without her. Yeah. Hands down. Yeah. She was there at every appointment, every chemo, she

drove me up and down from Calvin, every radiotherapy I went through everything. My mom was there by my side for it all. So yeah, in that sense it was lovely. Um, and my brother as well with my niece and his wife, they were very good to me as well.

(21:11):

I think family is massive for this. Like you really need the support because you're already going through it. So having that outlet of, of family around you kind of brings you away from like, oh, you know, you're just, you're going through chemo and you have this really hard life and it's, it is. But at the same time, having the outlet of having really great friends and family arrange, you're really bringing you from it because as awful as it is, it's like mine was obviously treatable, which was great. And I took it by the balls and I just went with it and I, I did what I had to do, but it was from the strength that my friends, my family gave me that really brought me through it because I have a really great family support. And that's definitely what you need. So, and my brother from Toronto came home, he surprised me one, one day. And he came home and he like rocked into the house. My remember my mom and I were like, oh my God. Yeah. And it was great. And then my brother from London and like, it's, it was, it was nice. Um, but

Speaker 1 (22:06):

It was, but it is, it is that impact while it does impact the person themselves, you know, physically, obviously and mentally. But it is that support crew. Everybody is impacted by the, by the job.

Speaker 2 (22:16):

It's not just the person who gone through. I think it's actually even harder for the people who are supporting you through because they're the ones that are trying to keep the bright face. They're the ones who are trying to pick up all the pieces and, and make it seem like everything is gonna be okay. So like my mom would've taken the brunt of it all. She would've been the one smiling and, and you know, like getting me through it and looking after me and like putting her life on hold to, to a point because she then started looking after her 22 year old daughter. Yeah. So like she would've put her life on hold and so would my stepdad of yeah. To help me. Yeah. And to make sure that I was okay. Mm-hmm <affirmative> and that's, that's hard.

Speaker 1 (22:50):

Like, yeah. Very, very difficult. And tell me, did you venture down the road of Dr. Google?

Speaker 2 (22:56):

No, actually I didn't went done <laugh> I think it was because I just didn't like, you know, I just didn't think about it. Yeah. I

Speaker 1 (23:02):

Think I was the information you were being given obviously was enough for you to

Speaker 2 (23:05):

Just accept. I think my mom probably did my, no, my mom deaf me did <laugh> but I just didn't. I think I was just, no, I'm not gonna say content, but I think I was like happy, as you said, with the information that I'd been given. And I was just like, but I'd say my mom was definitely a secret Googler. Yeah.

Speaker 1 (23:21):

She still is. And what about your friend network? Were they surprised? I mean, 22 years of age is young. Very, very young. I mean, look, statistically, um, women under the age of between 20 and 50, we have 23% of women are diagnosed, which is staggering statistic, you know? And you are one of

Speaker 2 (23:36):

Those. I am one of those, you

Speaker 1 (23:37):

Know, but how did your friends, they

Speaker 2 (23:39):

Were all as shocked as me. I think we were all just, we were like, what? I think it took a while for everyone to get their head around it. Um, and I remember I wrote a blog after being diagnosed. Um, and I wrote a couple of them because I think it was kind of like, again, like an outlet for me to maybe express my feelings that, that I had, cuz you've so many feelings, you've so many like things going on and you're like, you know, like I was a very positive person throughout it. I still am a very positive person. I think it's something that I was dealt with and to a sense, I'm glad that say it was me that I was so positive through it. Mm-hmm <affirmative> and I think that positively brought me on that journey of being like, because I was so positive throughout it, I didn't feel maybe as sick or I didn't, you know, I didn't get, let myself get down in the dumps about it.

(24:27):

I just thought like, you know what shit happens. And this has happened to me. Mm-hmm <affirmative> and let's just move on with it. And where do I go next? Mm-hmm <affirmative> what's my next point. Um, but it would've been, yeah, like I wrote a blog about it and I remember like people commenting being like, that's crazy. Like you're so young, like, yeah. I like, I can't believe that like you're only 22 and I think it's a, it's a massive shock and everybody who I met across the board, when I was in the hospital, after I'd been diagnosed, they were like, you're 22. And I'm like, yeah, yeah, 22.

Speaker 1 (24:55):

Cause it must have been daunting sitting in James's in the waiting room and looking around and seeing the age profiles of others.

Speaker 2 (25:01):

Yeah. Even now.

Speaker 1 (25:01):

And they're probably looking at you going with your mom thinking, oh, you're here with

Speaker 2 (25:04):

Your mom. It's your mom. Yeah. <laugh> yeah. It's even now like, so I, I see my oncologist every six months. Um, and I'll still go see him in his rooms and I will sit there and there'll just be women who are like between like 50 to 80. And I am always and always have been the youngest person in that waiting room. Yeah. And I remember being in, uh, James is after my surgery and it's a very, it's like a training, um, hospital. Yes. They have a lot of people come in like registrars and so on. And I remember sitting there and like a couple of guys came in after I'd

done my surgery and like, they were like, oh, do you mind if the, the, the guys here like stay while we do your examination? And like, oh, I had been so used at this point of people looking at my boob and I'd say, yeah, no problem. And it would've been guys my age. Yeah. Do you know what I mean? And they're all young doctors and I would've been like, yeah, it's fine. And like, they, like, they obviously like check it out and look at it and they feel it just to make sure that everything is obviously okay. And there's no infections and so on, but I remember thing. And like, I was like, oh my God, they're my age. And I'm here lying in a bed, like after having a mastectomy. And we're the same age

Speaker 1 (26:10):

I know. And they're probably astounded by that. Yeah.

Speaker 2 (26:11):

That is like, you know what I mean? And I'm like, that's crazy to think. Yeah. Um, but I just didn't have any shame. I was like, yeah, it's fine. <laugh> I know. Well, especially having you're so used

Speaker 1 (26:20):

To it. Yeah. But you've been through so much at that point. It's like,

Speaker 2 (26:22):

You're so used to it. There's no difference in it now at that point. Like, so,

Speaker 1 (26:26):

And when you finally finished your treatment and you finally finished your surgeries, um, you get to the point and I've often spoken to people about this where you are deemed fit and well, again, mm-hmm <affirmative>. And do you suddenly sort of, is that when you kind of think to yourself, holy mother, I have just been through on this rollercoaster.

Speaker 2 (26:47):

I think that's when the, the, the, the mind will start playing. I think that's when that sort of comes in, because you go on this road of, okay, well it's chemo this week and then next week it's surgery. And then you're on such a like, because it was so quick for me that it was such a quick moving and then that 14 months was up really quickly. And then I sat and I thought, oh my God, like I have no hair. I have no eyelashes. I have no eyebrows. I have no nothing. And I'm like 23. And I'm like, I that's, that's when the thoughts that's when you start thinking. And I think that's when the mental health comes into it. Um, I would never have suffered with, with mental health. It wouldn't like, I, like I said, very positive person heard the whole thing.

(27:31):

And then that was when I got to the point where I was like, okay, well, I'm not sick anymore because you know, my chemo's done and my surgery's done and this is done and that's done. So now it's time for me to get back into the world. But I think maybe had, I have led it, consume me and consume who I was as a person. I think that's when stuff could have started happening. Mm-hmm <affirmative> but because I just said like, you know, I'm still a C I'm not, oh, the girl with cancer. Like, I was still me and I was still doing what I wanted to do. Mm-hmm <affirmative> um,

Speaker 1 (27:59):

And so you just pictured your Zoladex and off you enter off, off

Speaker 2 (28:02):

Flights off. I went my lawn, how flights? My suitcase, like 20 kg overweight <laugh> but yeah, I just didn't let it consume me because I think that's what you have to do, but that was my experience of it. Yeah. That's what I needed

Speaker 1 (28:14):

To do. And I suppose it brings it all around to, you know, one of the things we as breast cancer, Ireland are passionate about is that, um, education and awareness piece. Yeah. Especially for younger women, because we find that, as we said earlier, breast check cater for the 50 plus people to go and have your free mammogram, but it's more a case of women understanding and men, because you know, one on 1000 men do have, do get breast cancer. It's about understanding the signs and symptoms that it is more than a lump. Yeah. You know, it can be that dimpling on the under side of the breast. Yeah. It can be one breast slightly larger than the other, you know, it can be a swelling in the lymph nodes. Yeah. Cetera. It's like there are eight signs and symptoms. And we often say to people, you know, the most important thing is to, we say often is to download our breast, to wear app. It's a free app.

Speaker 2 (28:55):

Yeah.

Speaker 1 (28:56):

Sends a monthly reminder to your phone. Yeah. That'll pink rip and pops up and it just shows you a simulated video guide on how to do a proper self exam. Yeah. And also what to look out for. Yeah. The idea being that if you, if you spot it, if you're normal, if you started a baseline of normal today yeah. In a couple of months, time, if anything changes. Yeah. And you're concerned you go and contact your GP because early detection, it does save lives. It does, you know, and we're quite

Speaker 2 (29:20):

Proven. You are,

Speaker 1 (29:21):

You are proof of, you know. Yeah. Because we even, we have a, a complimentary service that we provide to, um, schools. Yeah. And we send out our education coordinators all around the country. And one of the things we've noticed is that the awareness sessions they might do, there's a five of five of them covering yeah. Um, Munster, ster, sorry, Munster kind of the Langster. And what we find is that of the 35,000 women and young girls that they see every year, there are a couple of early detected cases as a result, which is, it is harrowing, but it's fantastic that we're catching them. Yeah. So that is really, really important. And I know it's something that you feel passionate about definitely is that wo younger women just need to take their breast health more seriously.

Speaker 2 (29:58):

Definitely. Because my friends would've been the same as me. Like the wouldn't have been breast aware. And then after my diagnosis of my friends were breast aware all the time and I always say it to them. I'm like, shake your boobs. And like my friend, my best friend just had a baby. And I'm always, I'm always like to her double check, just make sure, just do it every month for me, just make sure. And she is very good. She does do it cuz she's just like, no it's

happened to you and you know, it can just happen to anybody. And that's my thing is that it's not, I think it's very much associated with an older generation thing and it's, it's it's proving time and time again that it's not. Yeah. And I just want people, young people like people in middle age or like even health professionals to understand that when somebody comes to you with something like this to not dismiss them, because if it weren't from my mom that day saying I wanna see a consultant, I would've gone because I would've said, sure, you're a health professional, you know,

Speaker 1 ([30:53](#)):

And you were saying to me, come back in eight weeks and I

Speaker 2 ([30:55](#)):

Would've come back in eight weeks. Yeah. Without

Speaker 1 ([30:57](#)):

Very different story,

Speaker 2 ([30:58](#)):

A very, very different story,

Speaker 1 ([31:00](#)):

Especially with that aggressive.

Speaker 2 ([31:01](#)):

So that's, that's what I'm so passionate about is that I want everybody to know mm-hmm <affirmative> that it's definitely not just somebody who's 50 plus that this happens to mm-hmm <affirmative> and it is something that it will continue to happen. And there'll be people younger than me. Of course there will be. And I'm sure there is people who are younger than me when I was diagnosed. Um, but it's something that people need to be

Speaker 1 ([31:22](#)):

Aware, be aware of. And as you say, the medical profession, the GP practices, it's something that we took on about two or three years ago where we were sending our shower card.

Speaker 2 ([31:30](#)):

Yeah.

Speaker 1 ([31:30](#)):

To, to all the GP surgeries. Yeah. Because we were hearing a lot of, of, of case studies saying, you know, but my GP thought, no, I'm too young. So off you go on your Merry way and I'll see you in two months time or three months time. Yeah. If you, if it's still persists. Yeah. So oftentimes that can be in your case, it would've been a very different diagnosis.

Speaker 2 ([31:47](#)):

Yeah. And I'm so glad that my GP, as a woman was like, no, let's just send you yeah. Let's just send you as a precaution. Yeah. Let's make sure that we do this. Yeah. And that has to be something that has to be across the board.

Speaker 1 ([31:58](#)):

And it, it is interesting because the GPS do triage you. Yeah. Which is, you know, are you medium risk, low risk, high risk. Yeah. And for even them saying to you that you were probably a low risk. Yeah. Um, but it was, it was just, it was the perseverance of your mom. Yeah. Again that day. My insist. Yeah.

Speaker 2 ([32:14](#)):

Yeah. Because if it weren't for my mom, like I, I would've gone because I'm just like, it's, it's fine.

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

Like they know, but

Speaker 2 ([32:20](#)):

They know. And I, I, I can, I can say that when that consultant came in and felt my lump, he knew. Yeah. He knew. Yeah. Because he deals with this day in day out a hundred times a day. Yeah. Yeah. He knew.

Speaker 1 ([32:35](#)):

And that's it. And I think though, women and indeed men, you once you know, your body yeah. You know, and if you know your body and you know, your baseline, if you spot that abnormality, you know, you it's intuition as well. You just say, I gotta have this in yeah. Hundred percent, you know, and I do think women and we all need to be a little bit more forceful. Yeah. If we are concerned, you know, I really want to get to the, to the end of this. Yeah. Thank you so much Sorcha for traveling from cabin today to, to chat to us, I know you're going to be an inspiration to so many young women. I am, I am fully confident that they will all be so much more breast aware. Having listened to this podcast. Thank you so much. And I wish you the very best in the future. Thank you. The information in this podcast is based on the personal stories of those. We have chatted to. If you are concerned in way, please contact your GP immediately, or you can contact us at [breastcancer, ireland.com](http://breastcancerireland.com).