Speaker 1: 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 and the most challenging of times. My name is Ashton Hurley, and I'm the CEO of Breast Cancer Ireland. And you are 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 firsthand experience of the disease, or through sharing the experience of close family members.

Speaker 2: Hi there. My name is Claire McKenna and I'm delighted to guest host this episode of More Than a Lump for Ashlin Today. Breast Cancer, Ireland do amazing work in advancing, pioneering research and driving awareness, and I'm always very happy to do what I can to help them out. Therea Costelo was just 36 when she was diagnosed with breast cancer back at the end of season one. Therea spoke to Ash Ashley about her diagnosis and treatment and how it changed the direction of her life now, almost 10 years since her diagnosis. Therea is an ambassador with Breast Cancer Ireland and is also a local counselor in Tallah, west Dublin. She joins me today to talk about the impacts of a diagnosis of breast cancer on relationships in both a personal capacity and through her work, as well as through the conversations on her Facebook group, breast Friends, and we're also joined by psychotherapist and psychosocial oncologist of Ann Omar, who will talk about this subject as well as intimacy and dating.

Speaker 2: And Yvonne works therapeutically with people when illness has entered their lives. Yvonne has a special interest in psychosexual distress, infertility, and grief. Well, ladies, you're both welcome to the studio today. Thank you so much for joining me, particularly to talk about something that is very personal and that we don't talk about a lot, but perhaps we should a little bit more because it does affect literally everybody, their relationships and how they feel about themselves. So, Theresa, I know, as I mentioned, you spoke to Ash Ashley in detail about your diagnosis, but maybe remind us of then 10 years ago at 36, it, it came as such a shock to you.

Speaker 3: Yeah, it was. Well, look, it was something that came outta the blue. Um, I was 36. I was just, you know, living my life. I was very fit, very active, very independent, and, um, not breast wear at all. That's, that's one thing that I repeat all the time. I, I never checked my breasts because, um, I didn't think I'd get breast cancer. I knew nothing about breast cancer. So just in the shower one day I found a lump just by chance and went to my gp and he was kind of saying, look at, you're very young. And well, he, he, he did refer me on to St. James's, but when I went to St. James' just on presentation, they, they looked at my breasts and they, they knew I had, uh, breast cancer. I had indentation, I had three tumors. There was a lot going on there that because I wasn't vigilant and I wasn't educated, um, on breast health, that I didn't know my own normal, um, that it had gone so far. So, um, that just came out of the blue. So as a 36 year old single mother, um, it was an awful lot to get my head around. Um, I was, I was really left railing with it all. But, um, you know, when, when you're, when you're raising a child, um, they, they're your reason to go on and, and, and get through it. So I, I put my head down and fought <laugh>.

Speaker 2: And your son Reese was four at the time? He was

Speaker 3: Actually five. And he, um, hi. His, his sixth birthday was the 12th of September, and my first chemo was the 13th of September. And everything happened really quickly. I was diagnosed the end of August and my chemo had started within two weeks because it, my cancer had, um, a personality that was just making its way around. So, um, they had to get me in quick to, um, kind of stop it in its tracks.

Speaker 2: So And so, at that age, like he was starting school. So you had all that going on, you had all the treatment going on. And then what about you at the center of that, because that's, you know, Theresa with cancer, Theresa, the mom. How were you feeling in the middle of it and where were you at even with the thoughts of relationships?

Speaker 3: Well, one of my appointments, and I, I don't really ever talk about this one. Um, it was before I started my chemo and I, I, one, one of my cousins, um, came to all my appointments with me. Um, and w w we, we a I asked about like freezing eggs or, you know, because I was like, will I be able to have children? And I, it just, there was no kind of mention of it. Everything was just saving your life, getting, uh, your chemo start getting your treatment started. You'd have to have a mastectomy cuz I was like at one point going, I just got my extensions done so I won't take the chemo, I'll take the radiation, look, I'll do the surgery as well, you know, and they were like, no, um, you'll be getting everything done. Like, and that's it. But, um, at this appointment I said about, uh, freezing eggs and I was told Erin then, like, there wasn't a time, you know, I, I needed my chemo quick, um, at 36 being a single parent to a very active son, doing it on my own.

Speaker 3: Um, you know, look at, I suppose in an ideal world, I would've loved to have the opportunity, had I met somebody really who would be good to me and a good father to, um, have more children. At the time I didn't see that as an option for me. But I, I would've liken to have a choice, you know, if life felt for me the way I wanted it to fall. But in that, in that moment that it wasn't an option for me. And there was another day when I was ha having my chemo and a nurse just in passing and turned around. I, I was in denial a lot at the time, cuz you only hear what you want to hear in situations as well. And, um, I was in denial and a nurse said in passing to me when I was getting my chemo, um, do you have children?

Speaker 3: I said, yeah, I have a little guy. He's six. And she goes, ah, well look at, at least you got to have one. And I remember my cousin that I, I said it to him cuz he'd stepped out from him. I said, she said, I'm never having children. And I, that kind of hit me, there's, cuz you lose control of so much and when you're, when you're independent and you're on your own and you never ask anybody for anything, suddenly outside forces is saying children are off the market for you. Um, you'll have no hair. Oh, your breast is gonna be removed. Um, oh, and by the way, you may not get to see your child maker's communion. And this is something that, you know, you work your whole life to kind of provide and move forward in life and, you know, anything can happen to any of us. And that's, that's a big thing to get your head around.

Speaker 2: You were incredible that you're here to tell us this story today in fabulous health. Um, what about the changes to your body then? How did you get through that? Or how did you cope with that?

Speaker 3: Well, I was always really then and, uh, self-conscious. So like, I was really into going to the gym, really into watching what I eat into making sure, like I looked as good as I possibly could look, you know, and when I remember the hair falling out and getting shaved and, you know, I kind of, I looked at myself and I was like, I kind of went inward and I said, am I a nice person? Like, do I, how do I connect with people? Am I so self-absorbed at times about, I was probably a very insecure person, very self-conscious of how I looked still like that today to some extent. But I, I realized that like, you know, what was important was me being on this earth and me getting better for, for it to be there for my child. It, it opened, it changed my, the path of my life.

Speaker 3: It changed my behavior in life and it changed my attitude to, to life a lot of what I took for granted. Um, I don't take for granted anymore. Um, you know, I, the looks thing, look it, I'd always want to look my best, but I understand, you know, you can, you can, you can kill yourself in the gym. You can not do anything you like to look as good as you can and something can happen that's outta your control that can change that. So really, you know, you, you do an inside job and you, you make sure to be the best person that you can be. And I, I think everything else falls into place because, you know, we search for companionship, friendships and all of these type of relationships and, you know, what's on the inside seeps out. And, you know, you can, you can miss really good connections with people by maybe being so absorbing yourself at times. And, uh, a little, uh, stint of breast cancer will, will certainly, um, put things in perspective for you. And you, you actually, it opens your mind to, to I've, I've made friends like that I probably never would've ever spoken to in my life before. And I've, I've, I've such a, a wonderful mix of people in my life now. Such diverse people. So, you know, and there it's, it's, you know, I'm probably a more open person and probably people are easier to talk to me now, you know, that way cuz there's probably more empathy there.

Speaker 2: And it is such a tough lesson, you know, to appreciate a healthy working body that, as you say, we take for granted, but then to take changes in your body is still a really big deal. How did you feel about the mastectomy? Because so much of who we are as a female, is he held in our chest for some reason, whether it's from outside forces or from our own insight into what it means to be a woman. Wa was that something to get your head around?

Speaker 3: Yeah, it was like, yeah, from, you know, I suppose as a single, um, girl, you know, losing your breast and even there been a time during the chemo illness that you can't train the way, like I wouldn't have been able to train the way I would would. So, you know, I would've lost an awful lot of weight through, through my, uh, treatment and stuff. And I just felt like, you know, you're, you're just stripped back to nothing. Like there's, there's no mask anymore. There's no, you're just, you know, creeping along nearly, you know, and I I, there was times where I was like, Jesus, I couldn't have a successful relationship now when I, I was, you know, healthy, like he is going to want me now. That was one thing. And like, cuz I thought like, God, if I meet somebody, will he be afraid that there'll be a recurrence?

Speaker 3: Will he be, you know, how will he mentally cope with what I've been through? Will he look at me and be like, oh my god. You know, like, cuz you know, there, there is changes and yet we, we want to look our best. And, but you know, there, the, the reality for me is that, you know, I have had my breasts removed and that that was something I was going into at the time. I suppose relationships, they weren't on my mind while I was going through all this surgery and all. But, you know, definitely, you know, by the time radiation was starting and all, I was kind of going, God, like, you know, if I do start dating somebody, do I say like, look, I've had my breast removed or because I remember when I'd be out during chemo and I'd have my wig on and if somebody said hi, I'd say, hi, I'm, I'm wearing a wig. It's a wig <laugh>. And,

Speaker 4: Cause I felt like I was lying to the world, like, do you know this kind of

Speaker 3: Thing, <laugh>. So, um, it was just, yeah, I, I did worry about, I worried about like, you know, who would want because I certainly couldn't, I didn't have really ever a successful relationship before, um, my breast cancer. So I thought like, Jesus, I, I don't have a breast now as well and I, you know, I what whatever, you know, cuz breast cancer just kind of stays with you with medication and stuff for many years afterwards, I'm gone. Hell will anybody, I seen it as a chore for somebody. I felt like I was gonna be a chore for somebody, you know, that was, that was early days.

Speaker 2: And you have a Facebook community group and do you hear similar stories of how women feel about their bodies after these changes and after treatment? Yeah,

Speaker 3: Absolutely. Like, it, it, it brings up so much like, and you know, there's so much that people don't talk about. And like I tried to say to girls, we're all just people, you know, we all have the same worries, fears, needs, uh, these are just bodies. They're vessels to bring us around in life. But, you know, sometimes things get elf whack with them. And I get girls that like, they're afraid they won't meet anybody else. I get girls who when they get a breast cancer diagnosis, they feel a distance between them and their husband. Um, they're self-conscious, you know, about intimacy. Um, there's side effects like say vaginal dryness that people don't like to speak about or have girls on with that. And, you know, they might like to post anonymously about stuff like that because they're embarrassed and they don't, but then you'll just see a whole load of girls on, on the page going, this, this happened to me too.

Speaker 3: This is, there more information, is there, you know, anything like kind of to do with, you know, your body and sexual health. It's, it's always very, um, it's very common, all of the issues faced by people, but it's very, very rarely spoken about. And you know, I, I find like if something's said on the page, there does be an awful lot of interaction because people are just relieved or I, I'll get private messages going, oh, that girl mentioned she's suffering. I'm, I'm saying vagina journalists, right? It's just one thing, but shit like, do you know of a product or you know, that it's, people just want the conversation out there, but people are afraid to be the face behind the con, you know, behind the conversation.

Speaker 2: Yeah, of course. And I mean, it's not just about how attractive we're going to be to whoever our, our potential partner, our current partners are. It's how we feel in ourselves. And if you've got all that going on, it's really knocking your confidence and, and who you are.

Speaker 3: Yeah. Like I've had girls who've had long-term marriages and you know, they've gotten breast cancer, their marriage is broken down and you know, they're, they could be 50, 55 and do you know what it's, your heart is break for them because they, they feel isolated. They, they're trying to pick themselves back up after serious illness. They're conscious of their body and they've all of that gone into the mix. But there's, there, there can be really good outcomes as well because this all sounds very, you know, sad and negative. But it, it, this is just one, one aspect of it. Things do work out and good people do come in and, you know, it's, it's a, it's a lesson. You, you genuine people, genuine men don't care. Like if somebody's had breast cancer, they don't care if they have to probably take things a little bit slower physically and until their partner is feeling more confident and more, it's all about trust as well, you know, and, and losing that self consciousness. The self-consciousness comes around meeting somebody who you think, um, when you are not perfect ex aesthetically or whatever will just bolt. You know, that that's, that's where all of that comes into. And it's, it's, it's a trust. And you know, probably, uh, a lot of girls I know they've probably built better relationships because they have been more built around trust and more has been put into the relationships.

Speaker 2: Well, I want to get into your relationship in a moment. There is a man, however, I don't feel that's the most important thing. It's obvious the love you have for yourself after coming through all of this is the ultimate. And you've mentioned lots of other people who have come into your life along the way, but we will talk about the relationship, which kicked off during treatment in a moment. But I want to bring in Ivan Omar because Ivonne, like Theresa mentioned with her Facebook community group, you hear stories like this all the time through your

Speaker 5: Work. Yeah. And I have to say, Theresa, amazing, I mesmerized listening to you there. I'm not sure what I can add to make, uh, you know, you've given really, really, really sound, um, advice. It's highly complicated, isn't it? And everybody, before cancer, um, happens in their life, you know, they have their own issues and cancer can often just personify those and put them under a microscope and make them much, much bigger. And so if you have had sexual insecurities prior to that, and you've kind of touched on that there a bit, but maybe you are in a relationship and, um, prior to the cancer diagnosis, on a scale of one to 10, maybe it was around a five or a six, it's highly unlikely that cancer can, you know, make it up to an eight or a nine. Now for some it can, they can really revisit and see what's important, but for others it can, it can plummet, might get good for, uh, uh, a while.

Speaker 5: And so I always, when I hear, or when I met with, um, people, Claire, I always look at what was the relationship like beforehand and the presenting issue. Is it specifically related to the cancer or is it a preexisting issue? So that's really important for your listeners to, to delineate what existed before and what has the cancer brought in. And you've mentioned some of the side effects and you know, some women unfortunately, um, menopause as part of their, um, the, the course of their treatment and, and associated infertility as part of that as well. For some it's longstanding in it. For others it may be reversible depending on, on the type of treatment that they have and where you are at in your life cycle. So where does it fall? Are you somebody who's completed your family or are you somebody who, like, uh, Theresa has mentioned wasn't, uh, completed but hadn't really thought about it, but assumed that they may have more children again in the future?

Speaker 5: So that can provide a huge distance as well. And you know, I suppose sex can often be for some people when they do have infertility issues, um, it can be about procreation and not connectedness. So again, looking at that within your, your relationship, but you do mention vaginal dryness and that's one of the biggest things that, um, I suppose we've done a lot of work, um, from a GY oncology perspective in that. And we know that breast cancer patients equally suffer from a vaginal dryness. Um, and what we do know as we get older, irrespective of a cancer are not, you know, 60 to 70% of us will, uh, en encounter the issue. And there are lots of resources out there, um, Claire to address that. Um, we've worked very closely with McCauley's Pharmacy and they, uh, stock now the yes product, which is really, really difficult.

Speaker 5: We've also worked very closely with Shauna Scott who had on Sex Choppa, but she set up a specific, um, website called Body Grow, um, as well, which stocks the products that we would, um, recommend. And when I say we, um, I work as part of a team, um, in UCD with, um, gyne oncologists and oncologists in this country, and, you know, that we would stand over the products. Also, it's really important as well that, um, you do speak to your GP or you do speak to, um, uh, uh, your oncologist, be it your breast surgeon or your gyne oncologist around, um, your vaginal dryness because you may be eligible to have, um, uh, estrogen, um, suppositories or topical testosterone, but you need to go to an expert to get advice on that. But there are, there are certainly, um, options available for women, so don't suffer in silence around it.

Speaker 2: And this is obviously like a big turn your life upside down moment. Like Theresa mentioned, everything was going great and then all of a sudden you're facing possible death quite literally, and you're still to try and, you know, be a mom, try and be a partner, and that must be very, very

Speaker 5: Difficult. Well, yeah, I mean, for a lot of women it's the last thing on their mind. It's about survive initially. Um, and it's not for everybody, but mortality does come into play, um, around, uh, a cancer diagnosis. And then it's about, you know, trying to get through the treatment, uh, configuring a new norm because cancer leaves its mark, as I always say, in all varieties of our lives. Um, and it can raise its ugly head when you least expect it to. Um, and intimacy or sex is, um, exactly that, uh, in that arena. So it may be a case particularly first 3, 4, 5, 6, 7 months, you know, you just shelve it, it's not important. And then maybe after year one you're kind of going, yeah, I, I know it's something that I'd like to reconnect with. It's something that I miss. It's something that I know that there's a disconnect between me and my partner or it's preventing me from going out and dating.

Speaker 5: Um, and that's when I'd really invite you to start looking at the issue and really kind of swimming in it. And so, you know, the biggest thing for me is communication. So in an existing relationship, are there things that are unsaid around your sexual intimacy at this time? So if your listeners who feel that their partner needs to know things about them intimately that they don't know as a result of their cancer, what's stopping you from having those conversations and what needs to happen in order for you to have those conversations and really think about that? And if you're somebody who's sitting on the sideline who hasn't gone out or hasn't dated or hasn't put themselves forward because of, um, you know, this other aspect of your life that you've had at breast cancer, or maybe you're going through it, but you still want to date, um, I think Theresa put it so lovely there, there are so many compassionate people out there.

Speaker 5: If you yourself are a compassionate person, what makes you think that you wouldn't attract another person who's equal? As compassionate human beings are kind and generous for the most part. And I think if you meet somebody who's not prepared to walk along the path that you're on, well then they're not the right person for you. Cancer or no cancer, they're not a good person to be around or in your space. So, you know, it's like shopping. The first dress doesn't always fit, uh, Claire as you know, you know, go, go to another shop and, and get that dress that fits for you.

Speaker 2: And I think we always, when we think of intimacy, we think of sex and yes, of course that's a part of it. And yes, we're sexual beings and we all deserve to have that pleasure in our lives. Mm-hmm. <affirmative> and that is important, but it's also a chance to be vulnerable with somebody else. And it involves communication and talking and even to talk about what you are going through and be heard and seen and understood that that's intimacy too. And I know it must be so difficult to share on that level, and it doesn't sound very sexy to admit you've bought a pessie in the chemist earlier that day, but it is about building up that trust with somebody and and letting them in.

Speaker 5: Yeah. So there's two things. This was that come to mind first is, you know, um, spontaneous sex is something really that, I dunno, young adults and, you know, for, for adults as we get older, you know, planned sex is as good as spontaneous sex. So not to diminish that if you do have to do a bit of prepping before you're intimate, then that's okay. It can be equally as satisfying or equally be as good. And then the second thing, I suppose when you're speaking about, which is really, really important to me, so if we're saying metaphorically the bedroom is where all the intimacy or, or this sex happens, um, what's happening outside of the bedroom, what's happening that leads you to be intimate to somebody. And often it can be, you know, that your significant other has put out the ben bins and that's a turn on for you, <laugh>, you're so grateful that they've done that.

Speaker 5: Or you come home and the dishwasher is emptied now you laugh. But it's one of the biggest reasons why people come, couples therapy is the unequal distribution of labor within the, the, the household. And it makes sense. I mean, we're laughing here about it, but it can be highly contentious. And so if you're annoyed at them because you are putting out the bins for the fifth Sunday in a row, the chances are you're not going to be intimate that night with them in the bedroom cuz you're gonna be like to hell with you. You know? So if they've done it and if they demonstrate that they've listened, that's a turn on, that's a real arousal, that's a responsive reaction to something that can, you know, make you a little bit aroused by it. But if, if it's not, the opposite happens. And so I'd ask like, how do you shimmer outside of the bedroom?

Speaker 5: How do you connect your significant other? When's the last time you sent a flirty text? Or you said your ass looks nice in those genes, or vice versa, or your chest or your breast looks nice, your new breast looks nice. Or if you haven't had a mastectomy, you know, you, so there's a variety of reasons how we can compliment our significant others, but is that happening? And if it's not happening, I can safely say that your intimacy world is probably having a a knock. So get the stuff outta the bedroom. Correct. And the inside will will start to tick over. And it's not about punitive sex either. I suppose there's lots of ways for us to be intimate.

Speaker 2: And I know we're focusing on, you know, the woman going through breast cancer in this podcast, but what of the, the partners, cause I imagine it's quite difficult to watch somebody you care about going through this, particularly if they're not letting you in. Um, and like that must be hard to be going through chemo, possibly work, possibly kids, you don't want to have a long conversation at the end of the day. So how do you navigate through that kind of difficulty?

Speaker 5: So as a partner, how do they nav support their, the person going through Yeah. Or

Speaker 2: Is important for people listening to this to realize the importance of letting their partner in and and prioritizing that communication?

Speaker 5: I, I think it's fundamental because as a, a partner, uh, looking after somebody who's going through, um, a cancer, we often refer to them as the silent patient. So they themselves are not having the treatment, but actually they go through as much as the person that is having the treatment, though without the side effects. And so it's really important to look after the space that, you know, the label that, okay, they're a carer, but how do you get rid of that carer? How do you become a partner again? How do you debe all of that kind of medical, uh, state that your relationship has found itself in? And how do you come back being, you know, Mary and Tom or, or Mary and Jane, you know, how do you recreate your relationship again, the biggest thing is communication and not to neglect your partner. Your partner has needs too. And yes, it's okay to park them for a while, but it's important to that they don't feel invisible within all of this. And that takes effort. And I suppose being patient and kind to one another, I know it's so simple, but it's really important just to be tolerant, patient and kind, um, on both, both, uh, both sides. Um, and then it should tick over. But communication is absolutely key.

Speaker 2: And what about the changed body then? Um, how difficult is that to overcome? Because you hear it all the time post-baby, post-menopause, post midlife and post breast cancer mm-hmm. <affirmative>, it, it is something to take on. So do you need to start building the relationship with yourself in the mirror first before bringing somebody else in?

Speaker 5: Yeah, it, it's true. And this will come back to the partners, but they're, you know, a partner may be afraid, afraid to touch the breast, maybe, um, you may be afraid to ask what, what does it feel like? Does it feel different again? How do you create that space? And maybe that's a non-sexy space to do that. Maybe you do that in a very structured way. Would you mind touching my breast and let me see, what do you feel? Or, you know, you can do it prescriptively, um, as well, but with regards body image, um, something that I do or I recommend to, um, clients is stand in front of the mirror naked. That in itself can be a hard thing to do for all of us. And pick out three things that you like about your body and if you know, your immediate response is to see the absolute thing that you absolutely hate, you then have to go off and do an exercise and write 10 things that you like about, uh, your body as opposed to the one thing that you've high highlighted that you dislike.

Speaker 5: Um, so really important to nurture yourself from within. And I think, you know, Tracy, you, you gave a really lovely example earlier of about, you know, loving yourself first before you can get somebody else to love you. Um, you know, that's not said for a reason. It's said for a purpose and it's, it, it it is very, very significant. So the relationship that you build in with yourself first, and none of our boobs are perfect, cancer or no cancer. And yes, cancer can be very catastrophic for women, um, depending on the type of reconstruction that's available to them. But, um, there are lots of supports and resources out there. And so information is key. So I strongly recommend as well, you know, ask, ask, ask, ask, and be empowered in the decisions that you're making. Right?

Speaker 2: So all the work you've done in this area, you've actually collated for people.

Speaker 5: Yeah, I've been very fortunate, Claire to work with ucd women's cancers survivorship research coordinator. And, uh, as part of my role in that, we did a website. Now specifically at the moment it's, um, this is go, this is gyne oncology.ie. But we are hoping to do, uh, this is breast, uh, ie. But, uh, within that for the listeners, you, I mentioned, and you know, therea did as well about vaginal dryness, but there's an entire sexual wellness within this, um, platform so that if people log on and they can log on as a, a healthcare professional, uh, as opposed to, uh, a gyne oncology patient, they'll be able to access all of that information. And there's a six page, uh, PDF on everything that's to be known, uh, about vaginal dryness and how to look after your vagina, uh, during, um, not only menopause, but also post, um, uh, treatment of a cancer. So it's really, really informative and I strongly, strongly recommend, um, women, there's loads and loads of, uh, podcasts as well as videos around sexual wellness. So it's a good, good resource, uh, to access

Speaker 2: Better place to go than Google, I'd imagine. Well,

Speaker 5: This is the thing, we wanted something. And so we work with all the leading experts, not only in Ireland, but also overseas. So it's a one stop shop and really, you know, the hope is that it's rolled out to, to all cancers, but for now it was done in this phase. But as we know, there's lots of generic issues that tip over all cancers, particularly, um, sexual wellness, um, you know, communication to children about cancer, all of that. So all of that is accessible in this platform.

Speaker 2: Amazing. And I'm glad we have that, that's key information.

Speaker 5: Yeah, I agree.

Speaker 2: So Theresa, back to you then, and this man that you met during treatment. Tell us about that.

Speaker 3: Yeah, um, like I, when I was going through, uh, radiotherapy, um, I, I was at one of my appointments and, um, there's a guy in the, in the way I, I actually knew him from around because I'm from ta, everybody in TA knows each other. Um, but he, he was like a friend of my sister's husband. So, um, he came over to me, he was like, I heard you're sick now. We wouldn't have been real familiar with each other. And I was like, oh yeah. And he was like, my dad is, is in for a bit of treatment. I just, he, he'd just happened to bring him to a new appointment that day and that was grand. And then, um, we became Facebook friends and then he started kind of coming on nights out, like, you know, with, with me and my, my um, cousins and stuff. And, uh, about like a year later, it was my birthday night and he was due due to come out for a couple of drinks, but he, he texts me, he says, look, I won't, I'm not actually able to make me dad's not great. So his dad died the day after my birthday and two weeks later then we went on our first date <laugh>. So, um, yeah, it was all, uh, it was all kind of unexpected I suppose. And oh yeah, we got engaged <laugh>.

Speaker 2: Wow. Yeah. And did it help that he knew, because everybody knows everything in China, everyone

Speaker 3: Knows

Speaker 2: Everything about, did that help that you didn't have to say, oh, by the way?

Speaker 3: Well, it's, it's actually, um, you know, before meeting him when I was actually going through chemo, I did go on dates. People did ask me out on dates, and I did go on dates because, and, uh, because just like the way we're talking here today, like we're, we're, we're focusing on a lot of side effects and stuff. The, the main thing is, is that somebody going through breast cancer and treatment is still human with needs for fun and a time to push what they're going through to the back of their mind and just, you know, forget about it for a bit. So when, when I was going through my chemo, um, the, you know, guys did ask me out and I did go out on dates, nothing serious, but it, it all, it, it opened my eyes to the inherent goodness in people. And the good guys don't care.

Speaker 3: They're connecting with a person and everything else falls into place. You know, if, if a per person can be absolutely fantastic looking, fantastic looking, standing in front of you if they are not nice that you can't see their beauty anymore. So that's, that's where like, that's a, a lesson that I've learned. And like with Tom, when I met him, he knew I had breast cancer and it was never really, uh, there was never really an issue. He, my hair was short at the time and I, I hated my hair short. And uh, like he sometimes flagged me now going, remember, I went out with you when you were short hair, <laugh>, <laugh>. But we joke about a lot of things. There's no, we, we've a good friendship. He's a good person. Um, you know, we, we have a, a good relationship and it's, nothing matters.

Speaker 3: Like the, the fact I had breast cancer doesn't matter. The fact that I have had a mastectomy doesn't matter. You know, we have a very healthy, good relationship and you know, we work together as a team, we're compatible. And you know, he, like, there is times, and I, I do feel sorry for him at times because I can have bouts where I can get like a sense of fear that comes over me, that I'm going, you know, life is good and do I deserve this? Something bad's gonna happen, like, will I get a recurrence? And you know, that's, that can be tough on him watching me go through one of those phases. But you know, like it's, it's, uh, it, it was an unusual place to get together with somebody, but you know, you have to take these opportunities when they come to here.

Speaker 2: You certainly do. And have your eye open for opportunity <laugh>. And you know, sometimes I think we all need that. God, life is great, I don't wanna lose this. Yeah. You know, and it's not to spiral down with it, but I think, think we all need to not take everyth for

Speaker 3: Granted. And some good can come out of something really bad. Like do, you know? And you can be just bouncing along through life and you can meet somebody in the most unexpected circumstances and in the most unexpected way. And you can never write it off. That happiness isn't just around the corner from you. And I always say to girls, when the right person comes along, they will respect you. They will be your friend. They, they'll care for you. And the sex will be fantastic because there'll be all the ingredients that comes into that because the trust and being openly vulnerable with somebody, which is a huge turn on for, for people because you know, they're not gonna throw you to the side, they're not going to, you're not going to not be at a standard for them. And that, that's immaturity as well. Like I think about when I was younger and if somebody had the wrong shoes on, I'd be traumatized.

Speaker 4: <laugh> and the relationship, couldn't we on that? Oh my god, <laugh>, good luck, <laugh>. And when I'm 36 I get breast cancer and I have home breast, I'm like, hey, let's not focus on superficial, so get on me on the inside. You know what I mean? Like, you know, it,

Speaker 3: It's, there's a great thing with age and these knocks in life and even in my, in my work life, I think, and I'm not getting political here or anything,

Speaker 4: But

Speaker 3: I think when somebody comes to me with an issue, it, I can now transport myself into their situation and have a huge amount of empathy and understand things from their perspective and understand their struggle. Because I've been at a point in my life where, you know, did I know, would I work again? Did I know like a, any security I had, it could have been taken away from me. And that's, that, that's where like, you know, it all feeds into who you are and you, you know, your ex that experience. But from, from relationships, I, I definitely look at, I'm with Tom now, I think it's eight years. And like look at, we still enjoy going on weekends away around them, weekends away. And, you know, sitting, watching films, going out for drinks with our friends. It's all, you know, it's, it's, it's good. But if I probably didn't have that experience, would I have let somebody in who actually cared about me and was so good into my life or would I be chasing a bad boy?

Speaker 3: You know, I don't know, you know, hiss to know. And it's what we, it's the standard we accept for ourself and I think, and a lot of my girls and best friends as well, and I know as I see that change evolving them, they go from being very, very vulnerable to blossoming into these people who say, hang on, I am after fighting too and l to be here. I'm not letting anybody treat me bad. And I, I want somebody who's gonna be good to me. And that's where I am going forward. And it's amazing the amount of successful relationships that come out after that. There is that insecure time going, God, will I meet anybody, this and that. But then the, the right people gravitate. It's all about the energy that you give off and the, you know, fe rams and we all collide, like, you know, so.

Speaker 2: And what about your relationship with yourself and your body after everything you've been through?

Speaker 3: Like, look, I wouldn't have inhibitions or anything. Like I, I, I was an ambassador for, um, a medical underwear company there. And I think I did the photo shoot, I think I was 41 and I never thought, like at 41 I'd be standing in the underwear in a studio,

Speaker 4: Getting photographs, say,

Speaker 3: You know, I, I look, I I eat as well as I can. I exercise a lot, I can do no more. You know, I have a scar on my back. I remember when I started out and I think we were doing strictly and I was very self-conscious of the dress that I was gonna wear the night of that, the after party type thing, that it couldn't be backless. And before breast cancer, I loved, you know, having backless dresses and all, but I was so self-conscious cuz the scar is quite big. But now, like if I'm on a holiday, I'm in a bikini and I don't care, like if somebody sees scared, like it's, it just, it doesn't bother me anymore. But that comes with acceptance and grown after your, your experience that everything can be very raw and change can be difficult to get your head around and you kind of grow with it.

Speaker 3: And I think speaking on speaking to a person like yourself, like, God, I, you know, I know my girls like would get so much of what you've said in, in this, um, because it's just about educating people and letting people know they're not the only ones. Sometimes we get, we can hold things in so much and we can think I'm the only person in the world that feels like that. You know, I'm the only person who are, you know, post-surgery if their breasts don't turn out the way they expect it. Like, they can be a bit, you know, you think now I, I'm happy with mine, but like if it took me drop off, like they're not, it's, it's not the way, you know, I expect, I expect to have these like absolutely perfect real, real, real looking ones. Whereas, you know, what I have is great and I can wear anything. I can wear bikinis, I can wear dresses, you know, um, it doesn't affect me, but like my body image, like, you know, I, I I wanna look as good as I can. I exercise, I try and keep a thing I don't like, I, I wear what I want to wear and that's, that's where I'm at. But I understand that everybody has that mindset.

Speaker 2: Yeah. Well look, I think you're a shining light. There's lessons in what you said for all women, not just those who've been through breast cancer. But I think this conversation with you Theresa, and with you Yvonne, we'll just like you said there, Theresa, give people permission to talk about these things cuz the more we talk, the more we share, the more we come together. Thank you so much for being so open and honest. I hope Tom's okay with you. Tell all your secrets. <laugh> <laugh>. No, you didn't share too much. Theresa, thank you so, so much and continued success to you and to Avan Omar, thank you so, so much. And thank you to you for listening. The information on this podcast represents the views of our participants. If you're worried or concerned, please contact your gp.