

By JILL FOSTER

WHEN Mark Doel first noticed spots of blood on his bedsheets, he was not unduly concerned. Even when a work colleague pointed out that he had a couple of specks on his shirt, the keen badminton player assumed it was dry skin or that he was rubbing against his shirt during sport.

After several months, he visited his GP, who agreed it was probably a skin condition and prescribed cream to help.

In fact, Mark had breast cancer. 'I had no idea men could get this,' says Mark, 41, an IT analyst who lives with his wife Despo, also 41, and children Christian, ten, and Chloe, seven, in Morden, Surrey.

'There was a huge embarrassment factor. It took a while for me to be able to talk about it to anyone.'

'If it had been lung or brain cancer, I could have been more open about it. But there's a stigma that breast cancer is for women. When I told work I was ill, I couldn't say the words "breast cancer", I could only say: "I have cancer in my chest."'

Today, most of us will know a woman whose life has been touched by breast cancer, but what's less well known is that every year 300 men in Britain are told they have the disease.

Those affected are usually over 60; obesity and a family history of breast cancer — male or female — are also factors.

But Mark was only 37 and had no history of the condition in his family when he realised something was seriously wrong. Though he had no other symptoms, after using the cream prescribed by his GP the nipple still appeared to be like a sore that wouldn't heal. Then, on holiday in the summer of 2007, Mark started bleeding from his nipple after scratching it on a water slide.

Through his private health insurance, he went to see consultant breast surgeon Dibyesh Banerjee at St Anthony's Hospital, Surrey, the week after he came home.

'I'd Googled my symptoms and seen there was a chance it could be breast cancer. But as I was young, male and sporty, Mr Banerjee said the chances were exceedingly low,' says Mark.

'He examined me and gave me an ultrasound and within 20 minutes told me there was nothing there. But just in case, he took a biopsy of the nipple and sent the tissue to be examined. I left feeling confident that nothing was wrong.'

TWO weeks later, Mark's results came in and he was called back to the hospital. 'When I saw Mr Banerjee's face I had that sinking feeling. I heard the word "cancer" and all I could think about were my wife and children. I think I went into shock because I don't recall much after that,' he says.

Mark's cancer was the very early form, ductal carcinoma in situ (DCIS), the most common type that forms in the duct of the nipple. Though these breast cells are cancerous, they are described by doctors as pre-cancerous because they are contained within the duct and have not started spreading.

'Male and female breast cancer — including DCIS — are exactly the same,' says Mr Banerjee.

'In addition to breast lumps, men and women can present with symptoms such as nipple discharge, change in shape or

size of one or both nipples, or persistent swelling of underarm glands. 'The reason why the ultrasound did not pick up Mark's DCIS was because it had not formed a lump yet.'

'Strictly speaking, it's not cancer because by definition, cancer means something that will spread to another part of the body. However, DCIS will eventually become cancerous if you don't treat it, so it's very important to get it early.'

After Mark was given the diagnosis, he rang his wife Despo, who went straight to the surgery.

'I must admit I didn't know men could get breast cancer. I will never forget going into Mr Banerjee's office that day,' she says. 'I'm

a practical person and my first thought was: "Right, what do we do now?" Mr Banerjee said Mark could have surgery or wait — I definitely wanted to opt for surgery straight away.'

Mark agreed and was scheduled for mastectomy surgery two days later. Most male breast cancers are treated in this way — removing the whole breast rather than just a lumpectomy — because there is less tissue in the area than in a woman's breast.

'Mark's mastectomy involved removing the nipple and what little breast tissue there was underneath it and sending it to pathology,' says Mr Banerjee.

'The amount of breast tissue on

a man really depends on the individual — if he has 'man boobs' it may mean the equivalent of taking out an A-cup breast, but if he has a flat chest, it's a lot less. The pathologist then slices into that tissue millimetre by millimetre and examines the margins to see if the cancerous cells have reached the edge. If they have, it may mean more surgery because the cells may have spread.

'In Mark's case, it was contained in the breast, so he didn't need further treatment.'

Physically, Mark recovered well — the cancer had not spread and he did not need chemotherapy or radiotherapy. But the emotional fallout was only just beginning. 'A



Happy family: Mark with wife Despo and their children Chloe and Christian

THE EARLY SIGNS

MOST — though not all — male breast cancer appears in the form of a firm lump, just below the nipple and it is nearly always painless.

You may also experience:

- A CHANGE in the appearance of the nipple.
- A NIPPLE that is pulled into the breast.
- DISCHARGE from the nipple (that may contain blood).
- ULCERATION — a sore in the skin of the breast.
- SWELLING of the breast.
- LUMPS under the arm.

few days after the all clear it was like bang! The stress just hit me,' he says. 'I'd kept going through the diagnosis and operation, but afterwards I had to take a couple of months off work because I was an emotional wreck.'

'I think something like this is worse for men because we don't cope well with being out of control — and that's how this felt.'

At first, Mark found it difficult discussing the disease with anyone, and suffered nightmares and sleepless nights for two years after his treatment. Gradually however, he has been able to be more open. He says the reaction of male friends has been revealing.

'One of the guys at badminton saw where I'd had my op and said it made me look as if I'd been in the SAS. They try to play it down and make it more masculine. I'm sure it's because there's embarrassment about breast cancer.'

SURGEONS offered to tattoo a new nipple, but he decided against it. 'At first, I was definitely self-conscious when I took my top off,' he says. 'But I just got used to it. Now I don't really notice it.'

'Sometimes children spot it on the beach and say: "What happened to you?" But that doesn't bother me. If one little scar means I have more time with my wife and children, that's not really much of a price to pay.'

Every year 69 men in Britain die as a result of breast cancer. 'I look at life differently now,' says Mark. 'I used to get wound up by small things. Now they don't bother me.'

Though there are no statistics for men with DCIS, anecdotally there appears to be an increasing trend. 'The increase is probably to do with awareness and men being less embarrassed to come forward,' says Mr Banerjee.

'For men, it's common to have a little bit of breast tissue behind the nipples called gynecomastia. If it's soft and smooth on both sides, it's unlikely to be sinister.'

'If it's hard, non-tender and slowly enlarging over a couple of months, see your GP, who will refer you to a specialist — make sure you do not delay.'

■ FOR more information see cancer.org.uk

I didn't know MEN could get breast cancer — until I needed a mastectomy

The inside track FEET

EACH week an expert suggests techniques to improve your health. This week, Mike O'Neill of the Society of Chiropodists and Podiatrists talks about feet:

WHILE high heels are never good for us, there are ways of helping the body cope. Heels push the pelvis backwards, raising the risk of lower back pain. People who wear them often will also lack strength in their abdominal (or core) muscles, which can also lead to back pain.

If you love skyscraper shoes, try Pilates to strengthen your core muscles. When

not wearing high heels, go barefoot around the house to let your feet recover to their natural state.

High heels can push the big toe into the other toes — flip-flops or toning shoes such as FitFlops will separate out the big toe again, counter-acting the damage.

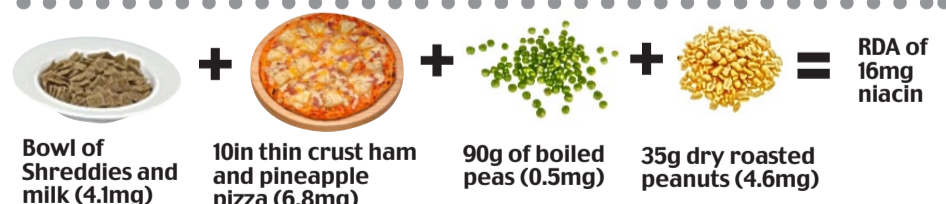
Many women choose high heels to make their legs look more toned. Exercising is safer and more comfortable. Try skipping — a great leg toner and one of the easiest ways to burn calories.

ANNA HODGEKISS



VITAMIN MATHS

The foods that add up to your daily recommended allowance



ONE of the B complex vitamins, niacin (also known as vitamin B3) helps the body to convert carbohydrates into fuel (glucose), which is used to produce energy. Niacin also helps the body use

fats and protein and, along with other B vitamins, is needed for healthy skin, hair, eyes and liver. Other good sources include pork, chicken, almonds and tuna.

ANGELA DOWDEN