

**CANCER AWARENESS IN THE  
MUSLIM COMMUNITY  
INFORMATION SHEET**

**WHAT IS THE AIM OF THIS LEAFLET?**

The aim of this leaflet is to improve cancer awareness amongst the Muslim families settled in UK. The incidence of cancer has increased by more than a third over the past 20 years. By 2020 it is estimated that one in two people in the UK will get cancer in their lifetime (Macmillan Cancer Support). Cancer can affect anyone regardless of age, religion, language or ethnic origin. The research evidence shows that cancer awareness is low amongst the Muslim community in the UK. Also, knowledge about National Cancer Screening Programmes is also low as a result the bowel, breast and cervical cancer screening uptakes are much lower in the Muslim community.

A team based at Sheffield Hallam University in collaboration with the Manchester Breast Screening Service recently undertook a number of community meetings in Sheffield and Manchester with Muslim men and women speaking Somali, Arabic, Urdu, Bengali and other languages to explore their views about cancer and to identify factors that would facilitate earlier presentation with cancer. The Muslim men and women all expressed a clear need to have language specific information on cancer risks, symptoms, prevention and treatment.

**KA WACYI-GELINTA  
KANSARKA BULSHADA  
MUSLIMKA AH  
WARQADDA MACLUUMAADKA**

**WAA MAXAY UJEEDDADA  
MACLUUMAAD-SIDAHAN?**

Ujeeddada macluumad-sidahan waa hormarinta wacyi-gelinta kansarka qoysaska Muslimiinta ah ee deggan waddanka UK. Cudurka kansarka wuxuu kordhay in ka badan saddex-meelood meel 20 kii sano ee la soo dhaafay. Sannadka 2020 waxaa lagu qiyasay in labadii qof uu hal qof qaadayo cudurka kansarka inta uu nool yahay ee waddanka UK (laga soo xigtay Macmillan Cancer Support). Kansarku wuxuu saamayn karaa cid kasta iyadoo aan eegayn da'da, diinta, luuqadda ama asalka uu ka soo jeedo. Caddaynta cilmi-baaristu waxay muujinaysaa in ka wacyi-gelinta kansarka ay hoosayso dadyawga bulshada Muslimiinta ee waddanka UK. Sidoo kale, aqoonta loo leeyahay Barnaamijka Baaritaanka Kansarka ee Qaranka (National Cancer Screening Programmes) way hoosaysaa taasoo maxsuulkeedu yahay in baaritaanka bowel-ka, naasaha iyo xubinta taranka dumarka uu aad u hooseeyo bulshada Muslimiinta ah.

Kooxo saldhigeedu yahay Jaamacadda Sheffield Hallam University oo ay wada shaqaynayaan Adeegga Baaritaanka Naasaha ee Manchester (Manchester Breast Screening Service) waxay bari dhaweyd samaysay kulamo bulsho oo ay la yeelatay ragga iyo dumarka Muslimiinta ah ee Sheffield iyo Manchester eeku hadla Af-Soomaali, Carabi, Urduu, Bangaali iyo luugadaha kaleba si loo ogaado ra'yigooda ku saabsan kansarka iyo fududaynta arrimaha hore u ogaanshaha kansarka. Dhammaan ragga iyo dumarka Muslimiinta ah waxay caddeeyeen in baahi muuqata ee macluumaadka khataraha, calaamadaha, ka hortagga iyo daawaynta kansarka oo luuqadooda ah.

## **WHAT IS CANCER?**

The organs and tissues of our body are made up of tiny building blocks called cells. Cancer is a disease of these cells and is caused by an uncontrolled growth of abnormal cells which may happen in any part of the body. The abnormal cells grow more rapidly than normal cells and eventually form a cancerous lump. Then the cancerous lump competes with normal cells for nutrients and blood supply.

Eventually the cancerous cells may spread into the bloodstream or grow into surrounding structures which may make it more difficult to cure or even impossible to cure. The earlier the cancer is detected the better chance there is of a cure and living longer.

In the UK, about 325,000 people were diagnosed with cancer in 2010, that's around 890 people every day. The most common cancers are breast cancer, lung cancer, prostate cancer and bowel cancer.

## **WHAT ARE VARIOUS TYPES OF CANCER?**

There are more than 200 types of cancer, each with different risk factors, symptoms and treatments. Most cancers are named from the organ where they start. For example, lung cancer starts in the lung, and breast cancer starts in the breast. If a cancer is not treated, it can spread into the organs near to where it started growing (apart from blood cancer).

## **WAA MAXAY KANSAR?**

Xubnaha iyo nudahajirkeenu waxay ka samaysan yihin qurubo yaryar oo la isku geeyay oo laguna magacaabo unugyo. Kansar waa cudur ku dhaca unugyadan iyadoo ay sababaan koritaan aan xadidnaynoo unugyo aan caadi ahayn taasoo ku dhici karta qayb kasta oo jirka ah. Unugyada aan caadiga ahayn waxay u koraan si aad uga badan kuwa caadiga ah iyagoo markaa sameeya laab kansareed.

Markaa kaddib laab kansareedka waxay kula tartamaan unugyada caadiga ah nafaqada iyo socodka dhiigga. Iyadoo markaas unugyada kansarka ay ku faafaan qaab socodka dhiigga ama waxay ku koraan qaab dhismeedka ku hareersan taasoo ka adkaynaysa daawaynta ama ka sii dhigaysa daawayntu mid aan suurtoobayn. Marka hore loo sii ogaadaba kansarka waxaa aad u wanaagsanaada fursadda lagu daawayn karo iyo nolosha oo sii dheerata.

Waddanka UK, qiyaastii 325,000 dad ah ayaa laga helay kansar sannadkii 2010, taasi waa qiyaastii 890 dad ah maalin kasta. Kansarada ugu badan waa kansarka naasaha, kansarka sambabka , kansarka xiniinya iyo kansarka mindhicirka weyn/malawaadka.

## **WAA MAXAY NOOCYADA KALA DUWAN EE KANSARKA?**

Waxaa jira in ka badan 200 nooc oo kansar ah, mid walba arrimo khatareed kala duwan, calaamado iyo daawayn kala duwan leh. Kansarada inta badan waxaa lagu magacaabaa xubinta ay ka bilowdaan. Tusaale ahaan, kansarka sambabka waxay ka bilowdaan sambabka , kansarka naasaha waxay ka bilowdaan naasaha. Haddii kansarka la daawayn, wuxuu ku baahi karaa xubnaha u dhow halka uu ka bilowday koritaankiisu (marka laga soo reebo kansarka dhiigga).

## WHAT ARE THE RISK FACTORS FOR CANCER?

Cancer can develop at any age, but it is most common in older people. More than three out of five cancers are diagnosed in people aged 65 and over. There is no single dominant cause for any type of cancer. However there are certain risk factors that increase the chance that a person might develop cancer in his/her lifetime. The most common risk factors for cancers (according to Cancer Research UK) are:

- Growing older
- Tobacco smoking, chewing
- Sunlight, exposure to ionising radiation
- Certain chemicals and other substances
- Some viruses
- Certain hormones
- Family history of cancer
- Alcohol
- Poor diet, lack of physical activity, or being overweight

## CAN CANCER BE PREVENTED?

Certain risk factors such as ageing, gender, genetic factors and family history, cannot be changed. Cancer often has more than one known cause and sometimes the exact cause is not recognised. However, some of the risk factors which are related to personal behaviours such as alcohol, smoking, poor diet and physical inactivity may increase your risk of developing several types of cancers.

You can help yourself by:

- Eating healthy food; eating more fruits and vegetables and less red meat, and processed (fast) foods
- Ensuring regular exercise and physical activity to maintain healthy body weight
- Stop smoking, and reduce your alcohol intake
- Going for regular health checks and attending cancer screening.

## WAA MAXAY ARRIMAHKA KHATAR AH EE KANSARKA?

Kansarku wuxuu samaysmi karaa heer kasta, laakiin wuxuu ku badan yahay dadka waawayn. In ka badan saddex ee shantii kansarba waxaa laga helaa dadka da'doodu tahay 65 iyo ka wayn. Ma jiro hal sabab oo ugu way nee nooc kasta oo kansar ah. Hase yeeshoo waxaa jira arrimo khatar ah oo kor u qaadaya fursadda in qof uu ku samaysmo kansar waqtigisa/waqtigeeda nololeed. Arrimaha khatar ah ee ugu caansan ee kansarka (sida laga xigtay Hay'adda Cilmi-baarista Kansarka - Cancer Research UK) waa:

- In da'du sii waynaato
- Sigaar cabid, calalin
- Fallaaraaha qorraxda, u bandhignaan fallaaraaha iifyo
- Qaar kiimikooyin ah iyo aalado kale
- Qaar fayrusis ah
- Qaar hoormoono ah
- Dhaxal qoys oo kansarka
- Khamri
- Cunto xumi, dhaq-dhaqaaq jismi la'aan, ama miisaan dheeraad ah

## KANSARKA MA LAGA HORTAGI KARAA?

Arrimaha khataraha qaarkood sida gabowga (duqowga), jinsiga, arrimaha hidhaa iyo taariikhda qoyska, lama badali karo. Kansarku inta badan wuxuu leeyahay in ka badan hal sabab oo la yaqaan iyadoo mararka qaarna sababta saxda ah aan la aqoonsan. Hase yeeshoo, qaab arrimaha khataraha ee la xiriira qaabka dhaqanka qofeed sida alkahoolka (Khamriga), sigaar cabidda, cunto xumida iyo dhaqdhaqaaq la'aanta waxay sii kordhin karaan khatartaada samaysanka noocyada kala duwan ee kansarka.

Waxaad naftaada ku caawin kartaa adigoo:

- Cunid cunto caafimaad leh; cunidda midho iyo quadaar/khudrad badan iyo wax yar hilibka cas, iyo cuntooyinka la warshadeeyay (sida fudud)
- Xaqiijinta jimicsi joogto ah, si loogu hayo jirka miisaan caafimaad ah
- Joojinta sigaarka, iyo yaratya qaadashadaada khamriga
- Aaditaanka baaritaan caafimaad joogto ah iyo tagitaanka baaritaanka kansarka.

Whilst adopting a healthy lifestyle doesn't guarantee that you won't get a cancer, it may reduce your risk. With regular preventative health checks, increase being aware of cancer symptoms, reporting symptoms early to your GP and attending regular screening will increase the chance of the cancer being detected early and also increase the chances of your treatment being successful.

*The NHS has introduced three national screening programmes for promoting the early detection of breast, bowel and cervical cancer. Screening means testing people in order to identify the early stages of a disease before they have any symptoms. Ask your GP for more information about these.*

## SOME MUSLIM BELIEFS AND ATTITUDES TOWARDS CANCER

There is a considerable knowledge gap regarding cancer symptoms and the risks of developing cancer among the Muslim community. Some of the views from focus group discussions with Muslim Community members illustrate some of the beliefs about cancer.

- ❖ *Cancer is a taboo and has a stigma attached to it (Pakistani women).*
- ❖ *I know the word cancer but I do not know what it means (Somali women)*
- ❖ *We hear about cancer but we do not have any specific knowledge of it (Pakistani women)*

In la joogteeyo qaab nololeed caafimaad leh ma ballan qaadayo inaan kansar kugu dhicin, waxay yarayn kartaa khatartaada. Baadhitaano caafimaad oo ka hortegid ah, waxay kordhinaysaa inaad ku baraarugto calaamadaha kansarka, u gudbinta calaamadaha goor hore dhakhtargaaga (GP) iyo tagitaanka si joogto ah baaritaanka waxay kordhinaysaa fursadda in kansarka la ogaado waqtii hore iyadoo weliba kordhinaysa fursadda daaawayntaada inay ahaato mid guulaysata.

*Hay'adda Caafimaadka Qaranka (NHS) waxay soo saartay saddex barnaamij oo baaritaanka qaranka ee horumarinta ogaanshaha goor hore kansarada naasaha, mindhicirka weyn iyo xubinta taranka dumarka. Baaritaanka macnahiisu waa in la baaro dadka si loo aqoonsado heerka markahoreba ee cudurka ka hor inta aysan muujin calaamadaha. Waydii GP-gaaga wixii macluumaad dheeraad ah ee arrintan ku saabsan.*

## QAAR AAMINAADHA MUSLIMIINTAIYO FIKRADHA KU ADDAN KANSARKA

Waxaa jira faraq aad u wayn oo aqooneed oo la xiriira calaamadaha kansarka iyo khataraha samaysanka kansarka ee bulshada Muslimiinta ah. Qaar aragtiyada ah oo laga helay doodaha kulamada xubnaha bulshada Muslimiinta waxay tusinayaan qaar aaminaadaha kansarka ku saabsan.

- ❖ *Kansarku waa wax las isku caayo waxaana la socda wax la isku calaamadeeyo (Haweenka Bakistaan).*
- ❖ *Waa aqaan erayga kansar laakiin ma aqaan waxa macnaheedu yahay (Haween Soomaali ah)*
- ❖ *Waan maqalnaa kansarka laakiin uma liihin wax aqoon gaar ah (Haween Bakistaani ah)*

- ❖ I used to throw away the appointment letters for cervical screening (Somali women)
- ❖ We are only told about Diabetes and not Cancer (South Asian men)
- ❖ Cancer is disease for white people(Somali men)
- ❖ Everyone can get cancer. It's a test from Allah and Qadr (Pakistani & Somali women)
- ❖ The notion of going to get yourself checked out by strangers, sometimes men, but even embarrassed in the presence of women, puts people off so don't want to know. Men won't go to see doctors for same reason. GPs are not empathetic to your needs (Pakistani women).
- ❖ We do not know how to examine ourselves or if we find something what to do with this finding (South Asian women)
- ❖ We are Muslims. We believe illnesses are from Allah. We should make Dua (prayer) to Allah to protect us and keep us in good health. (Pakistani women)

**The focus groups also found that Muslims hold beliefs that are not necessarily true.**

### Cancer Myths and Realities

**Myth:** Cancer is disease for white people  
**Reality:** Cancer can affect anyone.

**Myth:** If you have cancer you will die  
**Reality:** The risk of dying with cancer has decreased since 1970s. Most people with cancer are cured with timely and proper treatment. For instance 8 in 10 women with breast cancer are cured but this relies on detecting it at an early stage.

- ❖ Wuxuu qof kasta ayuu kansarku ku dhici karaa. Waa imtixaan Allaah ka socda iyo Qadarta (Haweenka Bakistaanka & Soomaalida)
- ❖ Dareenka ah inay ku baarayaan dad aadan aqoon, mararka qaarkood rag, laakiin ay sii waji dilayso joogitaanka haween, dadka ayay ka fogaynaysaa markaa ma doonayaan ogaanshaha. Raggu ma doonayaan inay aadan dhakhtarka sababo jira awgood. GP-yadu uma jajabna baahidaada (Haween Bakistaani).
- ❖ Ma garanayno sida aan annaga isku baarayno ama haddii aan wax ogaano waxa laga yeelayo waxaas la ogaaday (Haweenka Aasiyada Koonfureed)
- ❖ Wuxaan nahay Muslimiin. Wuxaan aaminsanahay in jiradu ka timaado Allaah. Waa inaan Barinaa (ducaysasho) Allaah inuu na dhawro oo uu na siiyo caafimaad wanaagsan (Haweenka Bakistaanka)

**Kooxaha kulamadu waxay ogaadeen in Muslimiintu ay aaminsan yihiin waxyaabo aan runtu ku salaysnayn.**

### Mala-awaalada iyo Xaqiyooyinka Kansarka

**Mala-awaal:** Kansarku waa cudur dadka caddaanka ah ku dhaca

**Xaqiyooyinka Kansarka:** Kansarku wuxuu saameeyaa qof kasta.

**Mala-awaal:** haddii kansar kugu dhaco waad dhimanaysaa

**Xaqiyooyinka Kansarka:** Khatarta u dhimashada kansar waxay hoos dhacday laga soo bilaabo 1970-naadkii. Dadka inta badan kansarka qaba waxaa lagu daaweyay waqtigii loogu talogalay iyo daawo ku haboon. Tusaale ahaan 10kii haween ah ee kansarka naasaha qaba 8 ka mid ah ayaa la daaweyay laakiin tani waxay ku xiran tahay in la ogaado heerka horeba halka uu marayo.

**Myth:** Cancer is a test from Allah. We should be grateful and have patience

**Reality:** Allah has created cures for the illnesses as well and as Muslims we are required to seek treatment for any disease/illness that may occur

**Myth:** Multiple screening causes cancer

**Reality:** Screening tests help detect cancer. If there are any risk associated with any type of screening, the health care professional which explain it to you before performing screening

## WHAT ISLAM (RELIGION) TELLS ABOUT HEALTH PREVENTION?

Islam provides a complete guide for living a healthy life. Health promotion practices are part of the Islamic faith. Instruction about healthy practices are found in the Quran and the Prophet Mohammed - *Peace Be Upon Him* (PBUH) Hadith which teaches Muslims to refrain from unhealthy practices and encourage Muslims to adapt a healthy lifestyle.

- ❖ Health is important for every Muslim men and women and it comes after once belief.
- ❖ Alcohol is forbidden in Islam.
- ❖ Islam says all intoxicants are forbidden (even a small amount).
- ❖ intoxicants create enmity and hatred among individuals and also hinder you from remembrance of Allah, so Allah expect us to abstain from their use
- ❖ Smoking is harmful to the body and Muslims are forbidden to harm themselves or others, smoking causes severe harm to human health and leads to death. Allah has forbidden self-destruction: "Kill not yourselves, for verily Allah has been to you most merciful (Qur'an 3:29)". The companions of the Prophet, PBUH understood that this verse forbade Muslim to expose himself to dangers or destruction.

**Mala-awaal:** Kansarku waa imtixaan ka socda Allaah. Waa inaan ku qanacnaa oo aan u samarnaa

**Xaqiqa:** Allaah wuxuu u abuuray daawooyin cudurada sidoo kale iyadoo Muslimiin ahaan nalaka doonayo inaan iska daawayno wixii cuduro /jirooyin ah ee ku dhici kara

**Mala-awaal:** Baaritaan badan wuxuu sababaa kansar

**Xaqiqa:** Baaritaanada waxay caawiyaan oggaanshaha kansarka. Haddii ay jirto wax khatar ah oo la socota nooc kasta oo baaritaan ah, xirfadlaха daryeelka caafimaad ayaa kuu sharaxaya ka hor samaynta baaritaanka

## MUXUU ISLAAMKU (DIINTU) KA YIRAAHDAA CAAFIMAADKA KA HORTAGGA?

Islaamku wuxuu bixiyaa hagid buuxda ouuu noolaanshaha qaab nolol caafimaad leh. Ficillada horumarinta caafimaadku waa qayb ka mid ah diinta Islaamaka. Hagitaano ku saabsan ficillada caafimaadka waxaa laga helaa Qur'aanka iyo Xadiisyada Nabi Maxammed – *nabadgelyo iyo Naxariis Korkiisa Ha Ahaato* (NNKHA), taasoo baraysa Muslimiinta inay iska ilaaliyaan wixii ficillo caafimaad xumo ah iyadoo ku dhiiro-gelinaya Muslimiinta inay sameeyaan qaab dhaqameed caafimaad leh.

- ❖ Caafimaadku waa u muhiim ragg iyo dumar kasta oo Muslim ah waxay qayb katahay wuxuu qofku aaminsanyayah.
- ❖ Khamradu waa ka mamnuuc Muslimiinta.
- ❖ Islaamku wuxuu sheegayaa in dhammaan waxa maandooriya ay mamnuuc yihii (xitaa wax yar).
- ❖ Maandooriyeyaashu waxay abuuraan cadaawad iyo nacayb dhex marta shaqsiyaadka iyadoo waliba kaa hor istaagaysa xasuusta Allaah, markaa Allaah wuxuu naga doonayaa inaad iska ilaalino istcimaalkooda.
- ❖ Sigaar cabiddu waxay dhaawacdaa jirka waana ka mamnuuc Muslimiinta inay dhibaateeyaan naftooda ama kuwa kale, sigaar cabiddu waxay ku keentaa dhibaatayn daran caafimaadka bani'aadmiga iyadoo ku keenta dhimasho. Allaah wuxuu mamnuucay in nafta la halligo: "Ha diliin naftaada, Allaah aad ayuu kuugu naxariistay (Qur'an 3:29)". Asxaabti Rasuulka, SCW waxay fahmeen in aayadan ay ka mamnuucayso Muslimiinta

<ul style="list-style-type: none"> <li>❖ Tobacco is a devitalize intoxicant therefore according to Messenger of God (PBUH) all inebriating and devitalize substances are banned.</li> <li>❖ Islam focuses on diet as one of the most important methods of maintaining health: "Eat and drink, but avoid excess". (Qur'an 20:81), and healthy nutrition: "And fruit in plenty, neither out of reach nor (supply) limited." (Qur'an 56:32-33)</li> <li>❖ Prophet PBUH once said "There is no disease that God almighty created, except that God has also created its treatment (Hadith - SahihBukhari, Book 25, Number 5466).</li> <li>❖ Prophet PBUH said" There is remedy for every malady, and when the remedy is applied to the disease it cures with the will of Allah Almighty" (Book of Bukhari&amp;Muslim)</li> <li>❖ Five times prayer (Salah) has its secondary effects ok keeping Muslims healthy as it requires complete mental concentration and promotes physical movements during ruku and sujud.</li> </ul>	<p>inay naftooda galiyaan khatar ama baabi'in.</p> <ul style="list-style-type: none"> <li>❖ Tubaakadu waa muqaadaraad nolosha disha sidaas darteed waxa la xigtay Rasuulkii Alaah (NNKHA) in dhammaan wixii nafta halliga iyo maandooriyeashuba ay mamnuuc yihiiin.</li> <li>❖ Islaamku wuxuu u arkaa in miisaanka cuntadu uu yahay mid ka mid ah nidaamyada ugu muhiimsan ee dhawridda caafimaadka: "Cun oo Cab, laakiin ka fogow inaad isku badiso". (Qur'an 20:81), iyo nafaqo caafimaad leh: "Iyo midho badan, aan yarayn aana laga joojinayn." (Qur'an 56:32-33)</li> <li>❖ Rasuulka NNKHA wuxuu yiri "Ma jiro cudur Allaah wayne uu abuuray, haddii uu jirana Allaah wuxuu la abuuray daawayntisa (Xadiis – Saxiix Bukhaari, Kitaab 25, lambar 5466).</li> <li>❖ Rasuulka NNKHA wuxuu yiri" Waxaa jira shaafiyayn dhib kastaba, markii dhibaatadu ay cudur tahayna waxaa lagu daawaynaya oggolaanshaha Allaah Wayne" (Kitaabada Bukhaari &amp; Muslim)</li> <li>❖ Shanta Salaadood tukashadooda (salad) waxay leeyihiin saamayntooda kale ee inay ku hayaan Muslimiinta caafimaad ahaansho maadaama ay u baahan tahay qushuuc qalbi ee buuxa iyadoo horumarinaysa dhaqdhaqaqa jismiga waqtiyada rukuudca iyo sujuuda.</li> </ul>
<p><b>WHAT ARE THE SYMPTOMS OF CANCER?</b></p> <p>Here is a list of most common symptoms of cancer, however, there are more than 200 types of cancer and it isn't possible to list all the symptoms that could be caused by every one of them. If you have a symptom that is not included in this list and it hasn't gone away after a few weeks, go to see your GP. The following symptoms can be a symptom of cancer however these can also be related to many less serious illnesses. It is important that you get your symptoms checked out.</p> <ul style="list-style-type: none"> <li>• A lump somewhere on your body</li> <li>• Changes in a mole on your skin</li> <li>• A cough or hoarseness that won't go away</li> <li>• A change in bowel habits</li> <li>• Difficulty in swallowing or continuing indigestion</li> <li>• Any abnormal bleeding</li> <li>• A sore or ulcer of the skin that won't heal</li> </ul>	<p><b>WAA MAXAY CALAAMADAH A KANSARKA?</b></p> <p>Halkaan waxaa ku taxan calaamadaha guud ee kansarka, hase yeeshi, waxaa jira in ka badan 200 nooc oo kansar ah macquulna ma ahan in dhammaan calaamadaha la taxo kuwaas oo keeni kara mid kasta oo iyaga ah. Haddii aad haysto calaamad aan lagu taxin liiskan oo aysan tagin dhawr usbuuc kaddib, aad GP-gaaga. Calaamadahan soo socda waxay ahaan karaan calaamad kansar hase yeeshi kuwaani waxay la xiriiri karaan jirooyin aan sidaas u darnayn. Waa muhiim inaad hesho calaamadahaaga oo la eegay.</p> <ul style="list-style-type: none"> <li>• Kuusnaan meel jirkaaga ka mid ah</li> <li>• Isbedel qayb yar oo jirkaaga ah</li> <li>• Qufac ama isbadal codka ah oo aan baxayn</li> <li>• Isbedel qaabka mindhicirka</li> <li>• Dhibaato wax liqidda ama qabsixiran joogto ah</li> <li>• Wiixii dhiig bax aan caadi ahayn</li> <li>• Kuusan ama soo bixid maqaarka oo aan biskoonayn</li> </ul>

- Difficulty passing urine
- Blood in urine
- Unexplained weight loss
- Unexplained pain
- Feeling very tired all the time
- Skin changes
- Nipple changes or a lump in the breast
- Unexplained night sweats
- Breathlessness

**If you notice any changes in your body that are not normal for you, please speak to your doctor or practice nurse straight away.**

### HOW CANCER IS TREATED?

Cancers are normally treated with surgery (removal of a lump or tumour through operation), chemotherapy or hormone therapies and radiotherapy or mixture of these procedures depending upon the types of cancer and their growth. However, many cases of cancer are treated effectively using chemotherapy (powerful cancer-killing medication) and radiotherapy (the controlled use of high radiation on the affected part of body). Side effects of these therapies can occur (e.g. tiredness, sore skin at the treatment area and hair loss) but subside in the later phase of treatment.

### BREAST CANCER

**Breast cancer** is where cancerous (malignant) cells are found in the breast tissue. It is the most common cancer in women. Annually around 50,000 cases are detected in the UK and 8 out of 10 breast cancers are found in women aged 50 and over. The four main risk factors for breast cancer are ones we can't do anything about i.e. gender, aging, certain genes and having significant family history.

- Dhibaato kaadi soo bixidda
- Dhiig kaadida ku jira
- Caatoobid aan sharaxaad lahayn Xanuun aan sharaxaad lahayn
- Dareemid daal mar kasta
- Maqaar badalmid
- Ib badalaad ama soo buuraan naaska
- Dhidid habeenkii oo aan sharaxaad lahayn
- Neefsasho la'aan

**Haddii aad ogaato wax isbedel ah oo jirkaaga oo aan caadi ahayn, fadlan la ahadal dhakhtarkaaga ama kalkaaliso caafimaad markiiba.**

### SIDEE KANSARKA LOO DAAWEYAYA?

Kansarka waxaa caadiyan lagu daaweyaa qaliin ahaan (goynta meesha buuratay ama toobid qaab qaliin loo istcimaalay), jiimoteraabi ama daawayn hoormoon (chemotherapy or hormone therapies) iyo daawayn fallaaro fiiskis ama isku dhex darid nidaamyadan ah taasoo ku xiran nooca kansarka iyo koritaankooda. Hase yeeshie, kiisas badan oo kansarka ah waxaa lagu daaweyaa si maxsuul fiican leh iyadoo la isticmaalayo kiimoterabi (daawayn kansar-dilid aad u xoog badan) iyo radiotherapy (u isticmaalid la koontoroolay ee fallaaro fiiskis aad u sarreeya ee qaybta jirka cudurku ku dhacay). Saamayno la socda oo daawaynahan ah ayaa dhici kara (tusaale daalanaan, urur qaybta maqaarka ee la daaweyay iyo timo lumid) laakiin baaba'aya wejiga ugu dambeeyaa ee daawaynta.

### KANSARKA NAASAH

**Kansarka naasaha** waa meesha unugyada kansarka (waxyeelo leh) laga helo ee nudaha naaska. Waa kansarka ugu badan ee dumarka. Sannadkii qiyasii 50,000 kiisas ayaa laga ogaadaa waddanka UK iyadoo 8 ka mid 10kii kansarka naasahaba laga helo dumarka jira 50 iyo ka wayn. Afarta arrimood ee khataraha ah ee kansarka naasaha waa kuwa aana waxba ka qaban Karin sida jinsiga, da'da, qaar unugyada hidha ah iyo lahaanshaha taariikh qoyseed.

**Breast screening**, introduced in 1989, involves taking x-rays of the breast (mammogram). The procedure detects breast cancers when they are too small to be realised, palpate or felt. A recent review (called the Marmot review) concluded that routine breast cancer screening reduces the risk of dying from breast cancer although there is a one per cent (1 in 100) chance of having a cancer diagnosed and treated that would never have caused problems if the women had not been screened. All women between 47 and 73 years old are invited for breast screening. The NHS offers breast screening every three years and should get their first invitation before their 50th birthday. Women over 73 years can still attend screening but have to refer themselves. They can either ask their GP to refer them or ring their local screening centre directly. The local screening centres are sensitive to the varying needs of the women. For example, the Muslim woman can ask for a woman to undertake their mammogram. You will receive a letter following your mammogram telling you of the results of the mammogram.

**Signs of breast cancer:** Things you need to look out for are: any lumps, thickening or bumpy areas; changes in appearance; discomfort or pain; nipple discharge, a rash, red areas that won't heal; and change in your nipple position (pointing differently or pulled in).

**Treatment:** You may be offered surgery, radiotherapy, chemotherapy or hormone therapy. You may be given one or a combination of these.

**Baaritaanka Naasaha**, waxaa la soo bilaabay sannadkii 1989, iyadoo ka kooban ku samaynta qaab x-rays ah ee naaska (mammogram). Nidaamka wuxuu ogaanayaa markii ay aad u yar yihiin kansarka naasuhu in la ogaado, laga shakiyo ama la dareemo. Dib-u-eegid goor dhow la sameeyay (loogu yeero dib-u-eegidda Marmot) waxay ku soo gabagabaysay in joogtayntabaaritaanka kansarka naasuhu yaraynayo khatarta u dhimashada kansarka naasaha in kasta oo ay tahay boqolkiiba hal (1 ka ah 100) fursadda in lagu ogaado kansarka laguna daaweyyo taasoo aan weligeed dhibaato keenin haddii dumarka aan la baarin. Dhammaan dumarka da'doodu u dhaxayso 47 iyo 73 sano jir waxaa lagu casuumaa baaritaanka kansarka naasaha. Hay'adda NHS waxay bixisaa baaritaan naasaha saddexdii sanoba mar iyagoo helaya casuumaadooda ugu horaysa ka hor inta aysan gaarin maalinta dhalashada ee 50ka. Dumarka ka wayn 73 sano weli way tagi karaan baaritaanka laakiin waa inay iyagu is keenaan. Waxay waydiisan karaan GP-gooda inuu gudbiyo ama iyaga ayaa si toos ah u wici karaan xarunta baaritaanka. Xarumaha baaritaanka degaanka aad ayey ugu nugul yihiin baahiyaha kala duwan ee dumarka. Tusaale ahaan, dumarka Muslimiinta waxay waydiisan karaan qof dumar ah inay samayso baaritaankooda mammogram ah. Waxaad heli doontaa warqad kaddib baaritaankaaga mammogram laguugu sheegayo maxsuulka baaritaanka mammogram.

**Calaamadaha kansarka naasaha:** Arrimaha inaad iska eegto ay tahay waa: wax soo buuritaan ah, soo balaarasho ama goobaha kuuskuuska; isbedel muuqaalka; ka helid la'aan ama xanuun; kuus saarid, cuncun, meelaha cas ee aan buskoonayn; iyo isbedel booska ibta (dhinac kale u jeeda ama hoos u riixan).

**Daawaynta:** Waxaa lagu siin karaa qaliin, radiotherapy, chemotherapy ama hormone therapy. Waxaa lagu siin karaa mid ama isku jir kuwaan ah.

## BOWEL CANCER

**Bowel cancer** is a general term for cancer that begins in the large bowel. Depending on where the cancer starts, bowel cancer is sometimes called colon or rectal cancer. It usually grows very slowly over a period of up to 10 years, before it starts to spread and affect other parts of the body. About 1 in 20 people in the UK will develop bowel cancer during their lifetime. It is the third most common cancer in the UK (about 42,000 people are diagnosed each year), and the second leading cause of cancer deaths (over 16,000 people dying from it each year). In 3 out of 4 bowel cancer cases it occurs in people aged 65 and over.

**Bowel screening** helps detect bowel cancer at an early stage. It can also detect polyps (small growths on the inner lining of the colon (large bowel) or rectum. People aged between 60 and 74 years are sent a stool test kit through the post every two years. Regular bowel cancer screening has been shown to reduce the risk of dying from bowel cancer by 16% (Cochrane Database of Systematic Reviews, 2006.) It is a self-screening test in which you collect small samples of your bowel motions on a special card that you then send to a laboratory for testing in a hygienically sealed, prepaid envelope. Only around 2 out of every 100 people tested are likely to have blood in their stool sample and then they will be called for further investigation at the hospital.

**Bowel cancer symptoms** include a change in your bowel habit; bleeding from the bottom or blood in your poo; pain in your abdomen (tummy); a lump in your abdomen; unexplained tiredness, dizziness or breathlessness; and unexplained weight loss.

**Treatment of bowel cancer** is through surgery, chemotherapy or specialist radiotherapy. You may be given one or a combination of these.

## KANSARKA MINDHICIRKA

**Kansarka mindhicirka** waa magac guud oo kansarka ka soo bilowda mindhicirka wayn. Iyadoo ku xiran halka kansarku ka soo bilowdo, kansarka bowelka waxaa mararka qaar loogu yeeraa colon ama kansarka rectal. Waxay caadiyan u kortaa si tartiib ah ka badan ilaa xilli 10 sano ah, ka hor inta aysan faafin oo aysan saamayn qaybaha kale ee jirka. Qiyaastii 1 ayaa 20kii qof ee UK ku samaysmaan kansarka bowelka waqtiga noloshooda. Waa nooca kansarka saddexaad ee UK (qiyaastii 42,000 dad ah ayaa laga helaa sannad kasta), iyadoo ah nooca labaad ee keena dhimashada (in ka badan 16,000 dad ah ayaa u dhinta sannad kasta). 3dii ka mid ah 4 kansarka bowelka wuxuu ku dhacaa dadka jira 65 iyo ka wayn.

**Baaritaanka mindhicirka** waxay caawisaa ogaanshaha kansarka mindhicirka heerka ugu horeeyaba. Waxay sidoo kale ogaanaysaa polyps (koritaan yare e gudaha sadarada ee colon (xameetiga wayn) ama rectum. Dadka da'doodu u dhaxayso 60 iyo 74 sano waxaa loogu diraa qalabka baaritaan saxaro boostadad laba sano kasta. Baaritaan joogta ah ee kansarka wuxuu muuijiyay yaraynta khatarta u dhimashada kansarka bowelka in le'eg 16% (Cochrane Database of Systematic Reviews, 2006.) Waa baaritaan qofku is baarayo taasoo aad ku soo aruurinayso sambalo yaryar ee soo helidda kaar gaar ah kaasoo kaddib aad u dirayso shaybaar lagu baaro qaab saxo fiican oo xiran, bashqad lacagta la sii bixiyay. Kaliya qiyaastii 2 ka mid ah 100kii qof ee la baaraba ayaa laga heli karaa dhiig saxaradooda iyago kaddib loogu yeerayo baaritaan dheeraad ah cisbitaalka.

**Calaamadaha kansarka mindhicirka** waxaa ka mid ah isbedel qaabka bowelkaaga; dhiig dabada ka yimaada ama ama dhiig ku jira saraxadaada; midhicir xanuun (tummy); soo buurnaan mindhicirka; daalitaan aan sharaxaad lahayn, wareer ama neefsasho la'aan; iyo miisaan lumid aan sharaxaad lahayn.

**Daawaynta kansarka bowel(mindhicirka)** waaqaab qaliin ah, chemotherapy ama radiotherapy qas u ah. Waxaa lagu siin karaa mid ama iyagoo isla socda.

## CERVICAL CANCER

**Cervical cancer** is the cancer in the cervix (neck of the womb). The womb and cervix are part of a woman's reproductive system. Almost 3,400 women are diagnosed with cervical cancer in the UK each year and around 750 women die of cervical cancer each year. It is the most common cancer in women under 35 years old.

**Cervical screening**, introduced in 1988, is offered to women aged between 25 and 64 (women between the ages of 25 and 49 will be invited every three years and women between the ages of 50 and 64 every five years). Early detection and treatment can prevent around 75% of cancer development. The screening test involves a nurse or doctor taking a small sample of cells from the surface of your cervix for examination. You will be invited by your doctor to undertake test.

**Causes of cervical cancer:** Human papilloma virus (HPV) is the major cause of the cervical cancer. It is found to be more common if you have had several sexual partners or have had a sexual partner who has had several other partners; if you smoke; if had first sex at an early age; and take immunosuppressant drugs (for example, after an organ transplant).

**Treatment of cervical cancer** is through surgery, radiotherapy or chemotherapy. You may be given one or a combination of these.

## KANSARKA XUBINTA TARANKA DUMARKA

**Kansarka xubinta taranka dumarka** waa kansarka faruuryaha xubinta (qoorta wareegga). Wareegga iyo faruuryuhuba waa qayb ka mid ah xubinta taranka dumarka. In gaaraysa 3,400 dumar ah ayaa laga ogaaday kansarka xubinta taranka dumarka ee waddanka UK sannad kasta iyo qiyaastii 750 dumar ah ayaa u dhinta kansarka xubinta taranka dumarka. Waa kansarka ugu badan ee dumarka ka hooseeya 35 sano jir.

**Baaritaanka xubinta taranka dumarka,** waxaa la soo saaray sannadkii 988, waxaa la siiyaa dumarka da'doodu u dhaxayso 25 iyo 64 (dumarka da'doodu u dhaxayso 25 iyo 49 waxaa lagu casuumayaa saddexdii sanoba mar iyadoo dumarka da'doodu u dhaxayso 50 iyo 64 ay tahay shantii sanoba mar). Oggaansho hore iyo daawaynba waxay ka hortagi kartaa qiyaastii 75% ee samaysanka kansarka.baaritaanku wuxuu ka kooban yahay dheecaan yar oo laga qaado unugyada dusha sare ee faruuryaha si loo baaro. Waxaa ku casuumaya dhakhtarkaaga si tan loo baaro.

**Sababaha kansarka xubinta taranka dumarka:** Fayruuska Human papilloma virus (HPV) waa sababaha ugu way nee kansarka xubinta taranka dumarka. Waa mid aad loo qaado haddii aad galmo la sameeysay lammaanayaal kala duwan ama galmo la samaysay lammaane asagu la sameeyo galmo lammaanayaal dhawr ah; haddii aad sigaar cabto; haddii galmadii ugu horaysay aad samaysay adigoo aad u yar; iyo qaadashada daawooyinka nooca immuno-suppressant (tusaale ahaan, kaddib xubin la badalay).

**Daawaynta kansarka xubinta taranka dumarka** waa mid lagu sameeyo qaliin ahaan, radiotherapy ama chemotherapy.Waxaa lagu siin karaa mid ama iyagoo la isku dhafay.

## PROSTATE CANCER

**Prostate cancer** develops when cells mutate and multiply uncontrollably in the prostate. The prostate is a small gland in the pelvis found only in men. About the size of a walnut, it is located between the penis and the bladder. Because of its location prostate cancer often affects urination, ejaculation and albeit rarely defecation. It is the most common cancer among men and the risk; about 41,000 men in the UK are diagnosed with prostate cancer each year and 10,000 die from the disease. Prostate cancer is less common in men below 50 years of age and the average age at diagnosis is 70 to 74 years. The risk is greater in men having a family history of prostate cancer and black African and Caribbean men.

**Prostate cancer symptoms** include trouble having or keeping an erection (impotence); blood in the urine; pain in the spine, hips, ribs, or other bones; weakness or numbness in the legs or feet; and loss of bladder or bowel control.

**Prostate cancer screening:** A small sample of blood is taken from a vein in your arm and sent to the laboratory to measure the level of Prostate Specific Antigen (PSA). Sometime Digital Rectal Examination (DRE) and Transrectal Ultrasound and biopsy are also conducted.

**Treatment:** You may be offered surgery or radiotherapy. Sometimes chemotherapy or hormone therapies are also suggested. You may be given one or a combination of these.

## KANSARKA XINIINYAHAY

**Kansarka xiniinya** wuxuu samaysmaa markii xubnuhu aamusaan ama ay bataan si aan xadidnayn ee goobta prostate-ka. Prostate waa tuubo yar oo xubinta raga ah oo kaliya laga helo nimanka. Qiyaastii cabbir aad u yar, waxay ku taalaa inta u dhaxaysa guska iyo xaniinya. Sababta la xiriirta goobteeda kansarka prostate inta badan wuxuu saameeyaa kaadinta, biyomanida soo baxa iyo marar galmada. Waa kansarka ugu badan ee raga ku dhaca iyo khatartaba; qiyaastii 41,000 rag ah ee UK ayaa la ogaaday oo qaba kansarka prostate sannad kasta iyadoo 10,000 u dhintaan cudurka. Kansarka Prostate wuu ku yar yahay raga ka yar 50 sano jir iyadoo da'da dhexdhexaad ahaan laga helo ay tahay 70 ilaa 74 sano. Khatartu wuu ku wayn tahay ragga leh taariikh qoys ee kansarka prostate iyo raga Afrikaanka madow iyo Kareebiyaanka.

**Calaamadaha kansarka xiniinya** waxaa ka mid ah dhibaato ku qabid galmada ama ku haynba (ragannimo xumi); dhiig kaadida ku jira; xanuun tuubada, miskaha, afaafka, ama lafaha kale; tabar darri ama laciifnimo lugaha ama faraha ah; iyo lumin koontoroolka bowelka.

**Baaritaanka kansarka xiniinyahay:** Waxoogaa dhiig ah ayaa laga qaadaa xidid gacantaada ah loona diraa shaybaar si loo cabbiro heerka Prostate Specific Antigen (PSA). Mararka qaar Digital Rectal Examination (DRE) iyo Trans-rectal Ultrasound iyo biopsy ayaa la baaraa.

**Daawayn:** Waxaa lagu siin karaa qaliin ama radiotherapy. Mararka qaar chemotherapy ama hormone therapies ayaa sidoo kale lagu taliyaa. Waxaa lagu siin karaa mid ama iyagoo la isku daray.

## LUNG CANCER

**Lung cancer** is the second most common cancer in the UK; about 42,000 people are diagnosed every year. In most people, lung cancer is related to cigarette smoking. Smoking causes nearly 9 out of 10 cases and further 3 out of 100 cases of lung cancer are caused by exposure to second hand smoke in non-smokers (passive smoking).

**Lung cancer symptoms** may include having a cough most of the time; a change in a cough you have had for a long time;

being short of breath; coughing up phlegm (sputum) with signs of blood in it; an ache or pain when breathing or coughing; loss of appetite and weight; and tiredness.

**Lung cancer treatment:** If you observe certain symptoms, contact your doctor who will do general health checks and will examine your breathing using a small device called a spirometer. If required, your doctor will refer you to hospital for a chest X-ray or CT scan or blood test. You may be offered surgery or radiotherapy or chemotherapy or combination of these for treatment.

## WHERE TO GET FURTHER INFORMATION AND SUPPORT?

**Firstly:** If you notice any changes in your body that are not normal for you, please speak to your GP straight away.

**Secondly:** Attend regular preventative health checks and advice and attend screening in order to ensure cancers are detected early.

**Finally:** For further information contact the

## KANSARKA SAMBABADA

**Kansarka Sambabada** waa midka labaad ee ugu badan kansarka waddanka UK; qiyastii 42,000 dad ah ayaa laga helaa sannad kasta. Inta badan dadka, kansarka sambabada wuxuu la xiriiraa sigaar cabidda. Sigaar cabiddu waxay sabataa ku dhawaad 9 ka mid ah 10kii kiisba iyo dheeraad 3 ka mid ah 100kii kiis ee kansarka sambabada waxaa sababa ugubadnaan oolid gacanta labaad ee sigaarka ee dadka aan sigaarka cabin (sigaar cabid aan muuqan).

**Calaamadaha kansarka sambabada** waxaa ka mid ahaan kara qufac qabid inta badan; isbedel qufac oo aad waqtii badan qabtay; neefta oo yaraata; qaab kale u qufucid ah phlegm xaako leh calaamado dhiig ah; xanuun markii la neefsanayo ama qufacayo; lumin quudsasho ama caatoobid; iyo daalitaan.

**Daawaynta kansarka sambabada:** haddii aad aragto qaar calaamadaha ah, la xiriir dhakhtarkaaga kaasoo samayn doona baaritaan caafimaad guud isagoo eegaya neefsigaaga isticmaalayana aalad yar oo la yiraahdo neefcabire (spirometer). Haddii loo baahdo, dhakhtarkaaga wuxuu kuu gudbinayaa cisbitaal sameeya xabadka oo la raajeeyo X-ray ama masawir CT ah ama dhiig baaritaan. Waxaa lagu siin karaa qaliin ama radiotherapy ama chemotherapy amaisku darid kuwan ah daawayn ahaan.

## XAGGEE LAGA HELAYAA MACLUUMAAD DHEERAAD AH IYO CAAWIN?

**Mar koowaad:** Haddii aad dareento isbedel jirkaaga ah kaasoo aan caadi kuu ahayn, fadlan kala hadal GP-gaaga markiiba.

**Marka labaad:** Tag baaritaano ka hortag oo caafimaad oo joogto ah iyo talo-bixin isla markaan tag baaritaanka si loo xaqiijiyo in kansarada hore loo ogapro.

following agencies or visit their webpage (the NHS Cancer Screening website also has translated information in your language).

- NHS Cancer Screening Programmes website for England <http://www.cancerscreening.nhs.uk>; or call 0800 707 60 60
- Visit the Cancer Research UK website at [www.cancerresearchuk.org](http://www.cancerresearchuk.org);
- Visit the Macmillan Cancer Support website at [www.macmillan.org.uk](http://www.macmillan.org.uk); or
- Call NHS 111 or visit [www.nhs.uk](http://www.nhs.uk)

**This leaflet was produced by the Research Team (Dr Anil Gumber, Dr Karen Collins, and Mr Mubarak M Ismail) at the Centre for Health and Social Care Research, Sheffield Hallam University with inputs from Dr Parveen Ali (University of Hull) and Mr AbdurRauf (Ethnic Health Forum, Manchester). The financial support was received from HIEF HEFCE Cancer Seedcorn funding.**

**September 2014**

Centre for Health and Social Care Research **Sheffield Hallam University**

**Ugu dambayn:** Wixii macluumaaad dheeraad ah la xiriir hay'adahan soo socda ama booqo boggoda internet-ka (Bogga internet-ka Baaritaanka Kansarka ee NHS waxaa sidoo kale lagu tarjumay macluumaaadka luuqaddaada).

- Bogga internet-ka Barnaamijyada England ee Baaritaanka Kansarka ee NHS <http://www.cancerscreening.nhs.uk>; ama wac 0800 707 60 60
- Booqo bogga internet-ka ee Cancer Research UK [www.cancerresearchuk.org](http://www.cancerresearchuk.org);
- Booqo bogga internet-ka ee Macmillan Cancer Support [www.macmillan.org.uk](http://www.macmillan.org.uk); ama Wac NHS 111, ama booqo [www.nhs.uk](http://www.nhs.uk)

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**(Bisha Sagaalaad) September 2014**

Centre for Health and Social Care Research **Sheffield Hallam University**