



Cancer Support France

A PRACTICAL GUIDE TO CONSULTATION, TREATMENT AND HOSPITAL CARE

Published by your local CSF association, covering
**Dordogne Sud/Lot et Garonne North/
Gironde East**

Association No W243002104

Background

Cancer Support France was founded by Linda Shepherd in 2003 as a result of her experiences during treatment for breast cancer in the French health service. Since then it has grown into a network of a dozen or more associations covering much of France. The purpose is to provide support in English for cancer sufferers and their family and friends, whatever their country of origin. This is given by ‘Active Listeners’ who receive training in support based on training from Macmillan UK. Each association is autonomous, with its own management committee and fund raisers, but best practice and experience are shared throughout.

The **Dordogne Sud association** was founded in late 2007 and covers an approximate area from North of Perigueux, to Villeneuve sur Lot in the south, and from Libourne in the West, to Belvès in the East.

This booklet is based upon personal experiences of using the service by both a cancer patient and a cardiac patient, both reasonably bilingual. It is intended to help newcomers with limited language skills to deal with the French health system. Be aware that not all hospitals will be precisely the same, but all will be broadly similar. We are indebted to Ivan Langley for his work in producing this booklet. If you have comments or suggestions as to how we can improve this booklet please contact us.

Contact details:

Local

Helpline
E-mail
Website

05 53 54 46 67
csf.dordognesud@gmail.com
www.cancersupportfrance.info

National **Helpline**

05 45 89 30 05

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1. The Basics

Going into hospital or a clinic for treatment, operation or a scan can be stressful in any circumstances, but especially in a foreign language. These notes will tell you about the procedures and the documentation involved.

a. Language skills

However poor your French, the staff will respect you for using it and will help if they can. Even if your French is good, it is better to have someone else with you to help you remember everything.

You will find a list of common words and phrases that you may need in these notes, but before going to any appointment make yourself a list of the ones you may need. See section six for a brief vocabulary.

You may be able to access interpreting services on request at the hospital, **or we may be able to provide them for you.**

b. Your Doctor.

These notes assume that you are part of the French health system and have nominated your *Medecin Traitant* (Family Doctor)

c. Documents.

You should always have with you some proof of identity, *Carte Vitale*, complementary health assurance card if you have one, and blood group card.

For identity card use your passport, *Carte de Sejour* or Photo/French driving licence.

d. 100% reimbursement

Once diagnosed with cancer you should be moved to 100% re-imbursement of costs, see the section on your

Carte Vitale. Ask your *Medecin Traitant or CPAM* for the form to apply for this.

e. **Dossier**.

You are often given the results of scans and tests immediately. You should take these with you to all appointments. Your *Medecin Traitant* will receive the written report but it is your responsibility to keep your copy and any films.

f. **Appointments**.

In general your *Medecin Traitant* or specialist will make various appointments for you for any investigations or treatments. See specific sections for advice as to what to expect at each of these.

g. **Transport**

If you need transport, your *Medecin Traitant*, or your hospital specialist, will give you an *ordonnance* (prescription) and you will be taken by one of the commercial taxi/ambulance services. This is especially helpful if you have to attend daily over a period, such as when having radiotherapy. You can be reimbursed if you drive or are taken in a private car – request the form from your doctor.

**DO NOT DRIVE YOURSELF HOME FROM THE
HOSPITAL AFTER AN ANAESTHETIC**

2. Specialist Appointments

Your doctor will recommend a specialist consultation in the first instance. Ask him to make an appointment for you unless your telephone French is good enough to cope. Your doctor will often give you a letter of explanation to take with you. During a course of treatment the specialist will often make follow-up appointments himself. In all cases

ask for it to be written down for you. **Numbers in French can be difficult.**

Always take your dossier of test results to all consultations.

A report will always go to your doctor. In most cases you will be given the results on the spot.

Provided that you have nominated a *Medecin Traitant* all of this feedback from various sources will build up in his database.

3. Blood tests, X-rays, Scans and Mammograms.

You should always have with you some proof of identity, *Carte Vitale*, complementary health assurance card if you have one, and blood group card.

Your doctor or specialist will give you an *Ordonnance* (a prescription) for the test to be done, which you take with you with all the standard documents.

For **BLOOD TESTS** you need to go to a *Laboratoire* which should be found in the nearest major town or hospital. Ask your doctor or specialist to recommend one. Usually, no appointment is needed, just turn up. You should be offered the choice of collecting your copy of the results or getting them by post. (*par courrier*) The latter is more convenient. Keep them all in your personal dossier. Most routine tests are done on the premises and the results are available within a day or two.

Your doctor and/or the specialist may specify in some cases '*à jeun*' which means without eating or drinking beforehand. This makes early morning tests a preference. Think of *déjeuner*, literally 'unfasting'.

It is a good idea to ask your doctor to include a blood grouping with the first test because you will need your blood group card if you go into hospital for an operation.

For **X-RAYS** and other **scans** an appointment is needed and, unless your telephone French is good, ask the doctor to make the appointment for you. This can often be done on the spot and you can try to choose a convenient time.

Parking is often difficult so leave plenty of time.

After having checked in you will wait for a while in the '*salle d'attente*' (waiting room) and then be called to a little changing room to remove such clothing as needed and wait to be called. The outside door can be locked to safeguard your possessions while you are being treated. After the X-ray you will normally dress and go back to the waiting room.

After a while, normally about 20 minutes, you will be called to be given the results.

Usually you will already have made an appointment with your doctor/specialist to review the results and decide any further action. If you have not, then please do so.

For **CT and MRI scans** the procedure is broadly as for an X-Ray but you may need to take with you some medication, '*produit*.' As well as your *ordonnance* for the test, you would also need another to go to the pharmacy to get this product.

Its purpose is to highlight the parts of the body they want to study. Before the scan you will be fitted with a *perfusion* (a drip) which will let the nurse inject you just before the scan.

You will be lying at the entry to a giant doughnut through which you will be passed slowly during the scan.

During the scan you may be told '*ne bougez pas*' (don't move) and for the CT scan '*ne respirez pas*' (hold your breath) and afterwards '*respirez*' (you can breathe now.)

CT scans are quite quiet but MRIs are very noisy, you will be given ear muffs, often with music.

After the scan and being disconnected from the drip you usually wait a while for the results in the salle d'attente.

Slightly different is a **Scintillography** scan, known in the UK as a gamma camera scan. This scan is to see if the cancer has migrated to the bones. You will be injected with a short-lived radioactive substance and then sent away, while it circulates, for about three hours.

You will be asked to strip and lay on a long table, discreetly covered by a sheet, and then scanned slowly from both above and below, each side taking about 10 minutes.

The radioactivity will be harmlessly excreted in your urine over the next few hours and being short lived will soon decay away.

Mammograms

If you are part of the French health service you will receive a notice of a scheduled scan every two years between the ages of 50 and 75 which is free between these ages.

Take your previous mammogram with you for comparison. Unlike CT and MRI scans your husband may be allowed to come in and watch.

You may be given the results after a short wait or they may be sent by post, to take back to your doctor. He would normally also receive a copy.

Metric Weight and Height. Ensure you memorise your weight in kilos and height in cm, you may be asked for it at the Laboratoire and certainly at a pre-anaesthetic interview.

4. Going into hospital/clinic as a day patient or inpatient

You may be going in for a test or operation involving anaesthetic, in which case you will have had a prior consultation with the anaesthetist, whose secretary will have given you a pre-admission questionnaire to complete. This must be presented to the pre-admission office for your hospital dossier to be opened. This may be before or on the day of admission. You will be advised which.

Document information, with translations, is on pages 6-12. You will also be given a list of instructions about precautions against infections and what to take with you see pages 14 and 15.

The precautions involve a thorough shower with ‘Betadine Scrub’ before leaving home and another before your operation. Betadine is an aqueous iodine product, which in this case is combined with a detergent. Betadine is commonly used as a disinfectant and does not sting in the way that the alcohol based iodine of yesteryear did.

Betadine scrub comes in a red can; the disinfectant version is in a yellow can.

You will have been given an *ordonnance* (prescription) beforehand to get the Betadine scrub from a pharmacy before going to hospital.

At the end of your stay you will have a final consultation with the doctor or surgeon and be told you can go home. A docket signing you off will be given you by a nurse on the ward, which must be taken to the hospital or clinic office to settle any charges you have accumulated, before being given a final exit document, the *Certificat de Sortie*.

If you have been anaesthetized you will be given a card detailing the products used to be kept for the next time you have an operation.

Here is a translation from a typical pre-admission document which you would be asked to fill in before admission to hospital. It is based on the sheets from the Clinique Esquirol-Saint Hilaire in Agen. **Details may vary elsewhere.**

<i>Nom</i>		Surname
<i>Nom de jeune fille</i>		Maiden Name
<i>Prenom</i>		Christian name
<i>Sexe M F</i>	<i>Né(e) le</i>	Date of birth
<i>Adresse</i>	<i>Telephone</i>	
<i>Medecin traitant</i>		Your doctor
<i>Avez-vous été hospitalisé? dans notre clinique</i>		<i>Oui/ Non</i>
Have you been a patient in this clinic before		Yes/No
<i>En quelle année?</i>		In which year?
<i>Souhaitez-vous une chambre particulière?</i>		<i>Oui/Non</i>
Would you like a single room? (If available)		Yes/No

The following section is completed by the clinic during registration

Votre entrée en clinique est prévue le.....
Your admission to the clinic is planned for.....

Le matin à 7 h 00 à jeun en ambulatoire

7am as day patient not having eaten or drunk anything that morning

Le matin à 11 h 00 à jeun

11am not having eaten or drunk anything that morning

L'après-midi à 13 h 00 à jeun

1pm, again not having eaten or drunk anything that day!

L'après-midi entre 15 h00 et 16 h 00.....

In the afternoon between 3 and 4 pm (this is for an operation the following morning so you can have lunch)

O *Motif de l'hospitalisation.....Reason for going into hospital*

O *En rapport avec ALD (Affliction de Longue Durée ?*
Are you covered for 100% re-imbursement because you have a long-term illness? (As a cancer sufferer you should be, if not check with the specialist or your doctor)

O *Préalablement à votre entrée en clinique, le Dr..... vous a informé des bénéfices et risques de l'intervention programmée ?*

Prior to your entry to the clinic has your doctor informed you of the benefits and risks of the proposed operation?

O *Une consultation pré anesthétique est programmée le*

A consultation with the anaesthetist has been arranged for..... (This will have been done during your consultation with the specialist/surgeon who has decided that an operation should be performed)

Prévoir 1 à 3 heures pour la consultation anesthétique et les éventuels examens complémentaires

Allow 1 to 3 hours for the anaesthetist consultation and other possible examinations

O *L'intervention est prévue sous anesthésie locale*
The operation is planned to be done under local anaesthetic

This is the end of the section that will be completed by the pre-admission department

Le jour de l'entrée en clinique, nous vous remercions de vous présenter au service des admissions avec les éléments suivants :

On the day of admission please go to the admissions desk with the following:

- a. *Votre carte vitale* Your *carte vitale*
- b. *Votre carte d'adhérent ou quittance justifiant de votre adhésion à une mutuelle ou compagnie d'assurance complémentaire*
A membership card or other proof of membership of a top-up insurance scheme. You will be asked for this even if you are on 100% re-imbursement
- c. *Une pièce justifiant de votre identité*
Some sort of proof of identity such as passport or French driving licence
- d. *Les dernières ordonnances de votre traitement*
Any prescriptions for treatment you are already having
- e. *Les médicaments que vous prenez actuellement*
Any medicines you are currently taking
- f. *Vos documents radiologiques*
Your X-ray films and reports
- g. *Vos examens de laboratoire*
Your laboratory reports
- h. *Votre carte de groupe sanguin*
Your blood group card. A British one will do but you will probably have to point out the blood group for them since the layout is different.

- i. *Vos effets personnels, linge et nécessaire de toilette*
Personal effects, clothing, towels, flannels and
toiletries

Nous vous remercions également de vous présenter au service des admissions avec ce document complété au verso.

Please complete the other side of this document before coming to the admissions department

The other side: -

A COMPLETER PAR LE PATIENT

Merci de compléter et de signer ce document

TO BE COMPLETED BY THE PATIENT

Please complete and sign this document

Consentement éclairé Consent document

*Au cours de la consultation avec le docteur
du*

*J'estime avoir été informé des avantages et des risques de l'intervention programmée. J'ai posé toutes les questions que j'ai jugées utiles et j'ai compris les réponses qui m'ont été fournies. J'accepte les modifications de technique qui pourraient avérer nécessaires pendant l'intervention.
J'accepte les éventuels actes invasifs à visée diagnostique ou thérapeutique, ainsi le dépistage sérologique dont je serais prévenue.*

In the course of a consultation with Drof Hospital.....

I have been informed of the advantages and risks of the programmed procedures. I have asked all the questions that I need to ask, and I have understood the answers given to me. I accept that changes to the planned procedures may be necessary during the surgery. I accept the necessary

invasive interventions for diagnostic or therapeutic reasons as well as blood screening, which could be for a range of conditions of which I will be informed in advance.

Bilan transfusionnel – transfusion et administration de produites dérivés du sang

Consent to a transfusion of blood or other blood product

J'autorise Oui
I accept *Je n'autorise pas*
I do not accept

PERSONNE à PREVENIR

Person to be notified

Next of Kin

Nom, Prénom

Surname Given name

Lien de Parenté

Family Relationship

PERSONNE de CONFIANCE Nominated person

O Je souhaite désigner une personne de confiance pour la durée de mon hospitalisation.

Cette personne pourra m'accompagner dans toutes les démarches, assister aux entretiens médicaux et m'aider dans mes décisions. Elle sera consultée dans le cas où je serais hors d'état d'exprimer ma volonté.

I wish to designate a nominated person for the duration of my hospitalisation.

This person can accompany me in all treatments, assist in medical care and help with my decisions. He/she should be consulted in the event that I am not capable of expressing my own wishes.

Nom Prénom Téléphone

Adresse.....

Date et lieu de naissance

Date and place of birth

Je ne souhaite pas désigner de personne de confiance pour la durée de mon hospitalisation

I do not wish to designate a nominated person for the duration of my hospitalisation.

ANONYMAT

ANONYMITY

Je désire que mon identité dans l'établissement reste strictement confidentielle. (Je ne souhaite pas recevoir d'appel téléphonique, je ne souhaite pas recevoir de visite. I wish my identity in this establishment to stay completely confidential. I do not want to receive any phone calls. I do not want any visitors.

REFUS DE COMMUNICATION DU DOSSIER MEDICAL

Non-authorisation of communication of my medical dossier

In summary this forbids communication of the medical dossier under human rights legislation.

Je refus que mon dossier médical soit communiqué à mes ayants droits

I forbid any communication of my medical dossier to my next of kin and/or beneficiaries

MINEURS / MAJEURS SOUS TUTELLE

Children and persons under guardianship

This section designates parents and guardians and commits them to everything in this document

After the preliminary form-filling you may be given an admission document such as this example from the
CLINIQUE DE VILLENEUVE

Hospitalisation prevue le à
Hospitalisation scheduled for Date.... Time

O *Hospitalisation* Admission to hospital
O *Ambulatoire* Day Patient

TARIFS DES PRESTATIONS

Price List (Examples)

(How many of these you will have to pay on discharge will depend upon whether you are on 100% re-imbursement or the terms of your complementary insurance)

<i>Chambre particulière</i>	Single room	58.00€
<i>(Par jour sauf la journée de sortie)</i>		
(Per day except for the day of departure)		
<i>Forfait Journalier</i>	Day rate	16.00€
<i>(Par jour y compris la journée de sortie)</i>		
(Per day including the day of departure)		
<i>Participation Forfaitaire</i>	Base charge per visit	18.00€
<i>Téléphone Forfait</i>	Cost	1€/ day
<i>Maximum</i>		5.34€
<i>Coût par unité consommé</i>	Cost per call unit	
0,15€		
<i>Télévision</i>		
5€/day		
<i>Repas accompagnant</i>		
Visitors meal		8€
/meal		
<i>Lit accompagnant</i>	Visitors bed, per night	7,70€
<i>(Nuit + Petit déjeuner)</i>	(Bed and breakfast)	
<i>Coque ophtalmique</i>	Contact Lens care kit	
7.00€		
<i>Thermomètre</i>	Thermometer	4.20€
Trousse de toilette	Toilet bag	3.00€

Veuillez prévoir:

Please bring the following:

*Si vous rentrez à la Clinique pour 1 JOURNEE
(Ambulatoire)*

If you are coming into the Clinic for 1 day (Day patient)

Apporter :

Trousse de toilette

Bring:-

Toilet bag

<i>Serviettes de toilette</i>	Towels
<i>Gants de toilette</i>	Face flannel
<i>Savon</i>	Soap

Si vous rentrez à la Clinique pour une hospitalisation
If you are coming into the clinic for a hospital stay

Apporter :

<i>Trousse de toilette</i>	Bring:
<i>Serviettes de toilette</i>	Toilet bag
<i>Gants de toilette</i>	Towels
<i>Savon</i>	Face flannel
<i>Pantoufles</i>	Soap
<i>Serviette de table</i>	Slippers
<i>Robe de chambre</i>	Table napkins
gown	Dressing
<i>Pyjama ou chemise de nuit</i>	Pyjamas or nightdress
<i>Linge de corps</i>	Day clothing and underwear

Par mesure d'hygiène, un thermomètre personnel est indispensable

In the interests of hygiene a personal thermometer is indispensable .This may not be needed because temperature is often taken in the ear now with a disposable probe, take one in case.

HYGIENE :

LUTTE CONTRE LES INFECTIONS NOSOCOMIALES
Précautions against hospital infections

Pour limiter au maximum les risques d'infection lors de votre hospitalisation, certaines mesures d'hygiène vous seront imposées

To reduce as far as possible the risks of infection during your stay in hospital, certain hygiene precautions are required.

Une douche la veille de votre intervention avec un savon désinfectant mis à votre disposition

A shower on the evening before your operation with a disinfectant soap provided for you. You may need to buy it on your doctor or surgeon's prescription. It is called Betadine scrub, which is an aqueous iodine solution with added detergent.

You are required to shower very thoroughly, including hair and all body orifices and crevices.

Une douche le matin de l'intervention avec le même savon

A shower on the morning of your operation with the same soap

Une élimination de toute trace de maquillage ou de vernis à ongle

A complete removal of all traces of makeup or nail varnish

Sachez que ceci est uniquement fait pour votre sécurité

Remember that these measures are for your own safety.

Tout le personnel est à votre disposition pour vous donner des renseignements supplémentaires à ce sujet

All members of staff are available to give you further information on this subject.

5. Questionnaire Médical préalable à la Consultation d'Anesthésiste

Examples of a Questionnaire to be completed before consultation with the anaesthetist

NOM

Surname

PRENOM

Given Name

Sexe

Age

Taille Height, in cm **Poids** ... Weight, in Kg
(Make sure you know these beforehand)

Avez-vous déjà eu des anesthésique générales

Have you had a general anaesthetic before?

Avez-vous déjà eu des anesthésique locales?

Have you had a local anaesthetic before?

Si OUI, pourquoi

If Yes, For what reason?

Avez-vous été victime d'un incident ou d'un accident anesthésique ?

Have you suffered a reaction to an anaesthetic?

Lequel?

What?

Avez-vous déjà été transfusé?

Have you ever had a blood transfusion?

Avez-vous ou avez vous eu des maladies particulières?

Si Oui, cochez

Have you, or have you had, any of the following conditions?

If Yes, Tick

CARDIAQUE	CARDIAC
Angine de poitrine	Chest pains/angina
Infarctus	Heart attack/infarction

Trouble de rythme	Heart rhythm problems
Hypertension artérielle	High blood pressure
Insuffisance cardiaque	Heart failure
PULMONAIRE	LUNGS
Asthme	Asthma
Bronchite chronique	Chronic Bronchitis
Emphysème	Emphysema
Embolie Pulmonaire	Pulmonary Embolism
NEUROLOGIQUE	NEUROLOGICAL
Convulsions	Fits/Convulsions
Epilepsies	Epilepsy
Hémiplégie	Stroke
ALLERGIE	ALLERGIES
Iode	Iodine
Antibiotique	Antibiotic
Aspirine	Aspirin
Eczéma	Eczema
Urticaire	Urticaria
Autres	Other allergies
MALADIE VENEUSE	VEINS
Varices	Varicose veins
Phlebitis	Phlebitis or thrombosis
DIGESTIF	DIGESTIVE SYSTEM
Ulcère	Ulcers
Calculs	Gall stones
FOIE	LIVER
Hépatite	Hepatitis
AUTRES	OTHERS
AFFECTIONS	
Diabète	Diabetes
Glaucome	Glaucoma
Myasthénie	Myasthenia
Ecchymosed	Excessive bruising
Saignements de nez	Nose bleeds

Avez-vous eu des pertes de connaissance?
Have you ever fainted/ lost consciousness?

Médicaments que vous prenez régulièrement ou prescrits ces derniers 6 mois?

What medicines do you take regularly or have had prescribed in the last 6 months?

Are you pregnant?

Si oui, nombre de cigarettes par jour ?

If yes, how many cigarettes per day?

Portez-vous une prothèse

Have you any
prostheses?

Dentier?

False Teeth or Crowns?

Lentille de contact ?

Contact lenses ?

Autre ?

Other?

Si vous possédez un bilan biologique, un électrocardiogramme, une radiographie pulmonaire datant de moins de 3 mois, veuillez le apporter lors de la consultation d'anesthésiste.

If you have any biological reports, such as blood tests, an electrocardiogram, a chest X-Ray taken in the last three months, please bring them to the consultation with the anaesthetist.

Transport

Transport to and from hospital can be provided by one of the commercial ambulance or taxi-ambulance services. You will need a prescription (*ordonnance*) from your doctor or surgeon. If you are to be transported by private car you should obtain a form for re-imbursement from your doctor or surgeon. **DO NOT DRIVE YOURSELF HOME FROM HOSPITAL.**

You can also get a daily car to take you to hospital for radiotherapy.

6. Vocabulary

Comment allez-vous / Comment vous sentez-vous ?

How are you? How are you feeling?

Vocabulary to help you at the hospital or pharmacy

Explaining your pain.

It is quite difficult to tell French doctors and nurses what your pain is like. In English we have a wealth of adjectives to describe levels of pain. Basic French normally teaches us two phrases: *J'ai mal à* or *J'ai une douleur à* Here are a few phrases and adjectives that might help you get a more accurate description of what that ache really feels like!

Acute/ sharp pain : Une douleur aiguë

Shooting pain : Un élancement

Burning pain : Une sensation de brûlure

Throbbing pain: Une douleur lancinante

Discomfort as in sore: Une gêne

Painful as in causing pain or misery: Douloureux

Agonizing pain : Une douleur atroce

Terrible pain : Une douleur abominable

Uncomfortable as in	Inconfortable/Je ne me
giving discomfort :	sens pas bien
Ache :	Une douleur / avoir mal
Stomach ache :	Mal au ventre/ mal à l'estomac/ douleur stomachale
Bone pain :	Une douleur osseuse
My back/stomach aches :	J'ai une douleur dans le dos /ventre
I have a headache :	J'ai mal à la tête

For more medical terms see also:

The Cancer Support France website
www.cancersupportfrance.info

The Chaplaincy of Aquitaine website
www.chapaq.org

The Anglo-Info site
<http://dordogne.angloinfo.com/countries/france/medterm.asp>

7. Carte Vitale and Attestation

Your *Carte Vitale* is your medical identity card and passport to treatment. Carry it at all times, as you must with some form of identification such as a driving licence.

How to get one is dealt with elsewhere.

It is a distinctive green colour and recently issued ones now carry a photo as well.

It must be validated from time to time, this is most easily done in a pharmacy where there will be a machine to do so. Just insert it and follow very simple instructions. It is particularly important to do so if you have been transferred to 100% *remboursement* as a sufferer from a long-term illness (ALD – *Affliction de Longue Durée*.)

You will also have been sent an *Attestation*, a document confirming your *Carte Vitale* and its contents, keep this safely.

You will be expected to produce the *Carte Vitale* during all interactions with the health service. For instance at the pharmacy when you are getting medicines on prescription, (*ordonnance*,) your doctor and any specialist, going to a clinic or hospital for a scan or for admission for treatment.

Sometimes the *Attestation* is also required by clinics and hospitals, so carry it with all the other documents.

Payment

If on ALD you will not usually be required to make any payment for that condition but there are exceptions. Some specialists require payment on the spot, for which you will be re-imbursed later. Some accept bank cards; some will only accept a cheque.

Finally

Finally remember we are here to help both you and your family – please do not hesitate to contact us whenever you feel you need support.

Contact details

Local

Helpline

05 53 54 46 67

E-mail

csf.dordognesud@gmail.com

Website

www.cancersupportfrance.info

National

Helpline

05 45 89 30 05

Website

www.cancersupportfrance.info

