# Terminally ill mother warns pregnant women to demand thorough cancer checks after misdiagnosis



A terminally ill mother has called on women to advocate for themselves and seek thorough medical evaluations after her own experience with misdiagnosis during pregnancy. Kayleigh Walker, 37, from Cardiff, faced debilitating symptoms that went unrecognised by numerous medical professionals, who attributed her pain to the normal struggles of pregnancy. With two young daughters to care for, her story sheds light on the challenges countless women encounter when their symptoms are dismissed, particularly when they are expecting.

Walker’s ordeal began with what she described as "a little bit of neck pain" early in her pregnancy. As her condition deteriorated, the pain spread across her back and arms, severely limiting her mobility and quality of life. Despite her increasingly desperate pleas for help, she was told that her discomfort was commonplace among pregnant women. "I felt unheard. I felt like I was just hidden behind my pregnancy," she shared. This sentiment is echoed by medical literature, which highlights that approximately 60% of women with pregnancy-associated breast cancer experience delayed diagnoses due to misattributed symptoms, according to studies on the subject.

The complications surrounding detection during pregnancy are exacerbated by physiological changes that can obscure underlying conditions. Breast cancer, the most common cancer among pregnant and postpartum women, occurs in roughly one in 3,000 pregnancies. These changes can result in diminished sensitivity to traditional diagnostic tools, making early detection challenging. A recent review in JAMA Surgery indicated that the primary symptoms of pregnancy-related breast cancer frequently present as painless masses often overlooked as benign pregnancy-related alterations.

In Walker’s case, the critical diagnosis came late. After developing a lump in her breast at 30 weeks pregnant, she finally received an ultrasound and MRI, which confirmed breast cancer that had already spread to her bones. In her words, by this point, the disease had "ripped through" her body, leaving her with ‘moth-eaten’ bones and necessitating emergency surgery. Such drastic impacts illustrate the urgency of improved awareness among healthcare providers regarding the unique concerns of pregnant women and the necessity for timely action when symptoms arise.

Survival rates for breast cancer have increased significantly over the past half-century, with today’s figures showing that three out of four women survive a decade post-diagnosis. However, for those diagnosed during pregnancy, outcomes can be influenced by the timeliness of their diagnosis, as highlighted in various research articles. According to the National Cancer Institute, pregnant women are often diagnosed later than their non-pregnant peers, primarily due to the attributed risk of treatment harming the fetus and the delays in recognising the seriousness of symptoms.

Despite the painful realities she faces, Walker looks to the future with resilience. Her daughter, Rosie, born prematurely at 3lb 1oz, serves as a poignant reminder of her fight. Participating in a charity fashion show to raise awareness for Breast Cancer Now, she hopes to empower other women, stressing, "Pregnant women aren't superheroes; they get ill like everyone else." Her advocacy aims to encourage women to assert their health needs and to challenge the often-patronising attitudes that can prevail in medical settings when pregnancy is involved.

Walker’s experience is emblematic of the broader struggles many women face against breast cancer, particularly during pregnancy. Breast Cancer Now reports that every month, around 1,000 people in the UK die from the disease, emphasizing the critical need for awareness and early detection. The symptoms not to ignore include any unusual lumps, persistent pain, and changes in the appearance or feel of the breast.

As Walker battles her incurable illness, she remains determined to instil resilience in her daughters, Millie and Rosie, stating, “I want them to know I was a resilient mum, that I’m never going to give up even in the face of adversity.” Her story is not just one of hardship but a call to action for all women to ensure their voices are heard, particularly when it comes to their health.

**Reference Map:**Paragraph 1 -   
[[1]](https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490)Paragraph 2 - [[3]](https://jamanetwork.com/journals/jamasurgery/fullarticle/394157),   
[[5]](https://pubmed.ncbi.nlm.nih.gov/25983605/)Paragraph 3 - [[2]](https://www.cancer.gov/types/breast/hp/pregnancy-breast-treatment-pdq),   
[[4]](https://www.uspharmacist.com/article/pregnancyassociated-breast-cancer)Paragraph 4 - [[6]](https://pubmed.ncbi.nlm.nih.gov/21382187/),   
[[7]](https://www.bcrf.org/blog/detecting-breast-cancer-during-pregnancy-insight-challenging-diagnosis/)Paragraph 5 - [[1]](https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490),   
[[2]](https://www.cancer.gov/types/breast/hp/pregnancy-breast-treatment-pdq)Paragraph 6 - [[1]](https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490),   
[[2]](https://www.cancer.gov/types/breast/hp/pregnancy-breast-treatment-pdq)Paragraph 7 - [[1]](https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490),   
[[3]](https://jamanetwork.com/journals/jamasurgery/fullarticle/394157)Paragraph 8 - [[1]](https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490), [[2]](https://www.cancer.gov/types/breast/hp/pregnancy-breast-treatment-pdq)

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## Bibliography

1. <https://www.dailymail.co.uk/health/article-14726753/breast-cancer-mum-pregnant-lump.html?ns_mchannel=rss&ns_campaign=1490&ito=1490> - Please view link - unable to able to access data
2. <https://www.cancer.gov/types/breast/hp/pregnancy-breast-treatment-pdq> - This article from the National Cancer Institute discusses the incidence, diagnostic challenges, and treatment considerations of breast cancer during pregnancy. It highlights that breast cancer is the most common cancer in pregnant and postpartum women, occurring in about 1 in 3,000 pregnancies. The article emphasizes the difficulties in early detection due to physiological changes in the breast during pregnancy, which can lead to delays in diagnosis. It also outlines various diagnostic methods and treatment options, noting that while survival rates may be lower than in non-pregnant women, this is primarily due to delayed diagnosis.
3. <https://jamanetwork.com/journals/jamasurgery/fullarticle/394157> - This literature review published in JAMA Surgery examines the clinical presentation and causes of delayed diagnosis in pregnancy-associated breast cancer (PABC). The study found that most women with PABC present with a painless mass, but delays in diagnosis are common, often due to misattribution of symptoms to pregnancy-related changes. The review underscores the importance of early detection and the need for heightened awareness among healthcare providers to reduce diagnostic delays.
4. <https://www.uspharmacist.com/article/pregnancyassociated-breast-cancer> - This article from US Pharmacist provides an overview of pregnancy-associated breast cancer (PABC), including its incidence, diagnostic challenges, and treatment considerations. It notes that PABC occurs in approximately 1 in 3,000 pregnancies and discusses the difficulties in diagnosis due to physiological changes in the breast during pregnancy. The article also outlines treatment guidelines, emphasizing the need to balance effective cancer treatment with fetal safety, and highlights the importance of timely diagnosis to improve outcomes.
5. <https://pubmed.ncbi.nlm.nih.gov/25983605/> - This study published in the Journal of Obstetrics and Gynaecology Research assesses the clinical presentation and causes of delayed diagnosis in patients with pregnancy-associated breast cancer (PABC). The research found that 60% of PABC patients experienced delayed diagnosis, with physician reassurance being a significant contributing factor. The study emphasizes the need for increased awareness among clinicians to reduce delays in diagnosis and improve outcomes for pregnant women with breast cancer.
6. <https://pubmed.ncbi.nlm.nih.gov/21382187/> - This research published in the Journal of Medical Imaging and Radiation Oncology reviews breast imaging in women with breast cancer during or within one year of pregnancy. The study found that ultrasonography is recommended for the initial diagnosis of breast symptoms during pregnancy and lactation, as it is more sensitive than mammography in detecting breast masses. The article also discusses the role of mammography and MRI in selected cases, highlighting the importance of appropriate imaging to reduce diagnostic delays.
7. <https://www.bcrf.org/blog/detecting-breast-cancer-during-pregnancy-insight-challenging-diagnosis/> - This blog post from the Breast Cancer Research Foundation discusses the challenges of detecting breast cancer during pregnancy. It highlights that breast cancers are harder to find in pregnant women due to physiological changes such as breast enlargement and increased density, which can make a mass difficult to detect. The article emphasizes the importance of early detection and the need for heightened awareness among healthcare providers to ensure timely diagnosis and treatment.