

Herwatch

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Barnsley



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MYTHBUSTERS

Spectrum sexual health
give us the answers

CHECK IT OUT

We share our cancer
screening experiences

"TOO MUCH PAIN"

Heavy periods – when to
talk to your GP

... AND MUCH MORE!

Autumn 2025



Welcome

FROM THE HEALTHWATCH BARNSTABLE TEAM

Who we are

We are your independent health and social care champion. Whether you've had a good or bad experience, we can use your feedback to improve services for everyone.

What we do

Every year we ask the people of Barnsley to vote for three health subjects for us to focus on alongside our daily work, we call these our priorities. This year Women's Health was voted in the top three.

Why we do it

This magazine has been created from feedback we gathered from you as part of our Women's Health Survey. Hopefully we can start more open conversations and empower women to continue to share their experiences.

Did you know?

The average menopause age is 51

Ey up Reader,

First things first, a huge thanks for grabbing a copy of our mag!

We created this magazine with a mission: to ignite a vibrant convo about women's health. When it landed in our top three priorities for 25/26, it got us opening up about our own health journeys.

And then, boom! Your survey feedback hit us right in the feels. We realized just how much we wanted to shout from the rooftops, "You are not alone!"

We get it—some topics can be tricky or even a bit blush-inducing. But, opening up to someone you trust can spark conversations you'd never imagine having. Let's get chatting!



healthwatch
Barnsley

Ways to keep the conversation going

Share your own experiences – let people know they are not alone

Reach out – Let friends and family know you're there if they need to talk

Keep in touch – it's easy to shut yourself off from the world but it doesn't help

Signpost – you won't be able to help with all their problems so remember to encourage them to get the support they need

Put the kettle on – nothing better than sharing a story over a brew

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Question time

Helen is an Advanced Nurse Practitioner at a bustling GP practice in Barnsley. With a keen interest in women's health, she has generously taken the time to address some of your questions..



Helen Lavender, Advanced Nurse Practitioner

Ever since I started developing breasts I've always had one bigger than the other. Now I'm 23 and one is noticeably bigger and I'm struggling to hide it with padding. Is this something I should go to the doctors about?

AIt's actually very common for breasts to be uneven in size, almost every woman has some degree of asymmetry! For many, one side develops a bit more glandular tissue or fat than the other, and the difference can become more noticeable as your body changes with hormones, weight, or age.

When it's normal

- The size difference has always been there (even since puberty).
- There are no new lumps, pain, skin changes, or nipple discharge.
- The larger breast just feels naturally fuller or shaped differently.
- Breast tissue can change during your menstrual cycle but this generally resolves during your period..

In this case, it's usually nothing to worry about medically, just a natural variation. Some people use bras with removable padding or custom inserts to even out the look, which can help clothes fit better

When to see a health care professional (HCP)

You should get checked if you notice:

- The size difference appeared suddenly or has increased quickly.
- A new lump, thickening, or pain in one breast.
- Skin changes, dimpling, redness, or the nipple becoming inverted or leaking fluid.

If any of these apply, a HCP can do a quick exam or ultrasound to rule out anything unusual. But if your breasts have always been different sizes, it's typically just part of your normal anatomy. Get used to the way they feel and report any abnormalities to your health care professional.

Q My periods are irregular and painful. It feels like some months it lasts for 2 or 3 weeks and other months I don't have one at all. Is there anything I can do to make them easier?

A Always seek medical advice in this situation as there is generally an explanation why this is happening. There are several possible reasons for irregular or painful periods. They can be caused by hormonal imbalances, such as polycystic ovary syndrome (PCOS), thyroid problems, or perimenopause. Conditions like endometriosis or adenomyosis can lead to pain and heavy bleeding, while fibroids or polyps may make periods last longer or become heavier than usual. Sometimes stress, changes in weight, or starting or stopping contraception can also disrupt your menstrual cycle.

It's also important to consider sexually transmitted infections (STIs), as infections such as chlamydia can cause irregular bleeding or pelvic pain. If you're sexually active and haven't been tested recently, it's worth arranging an STI screen with your sexual health clinic. You should also make sure your cervical smear test (cervical screening) is up to date, as this helps detect early cell changes that could cause abnormal bleeding.

Irregular or painful periods are common and often treatable, but they shouldn't be ignored. Keeping track of your cycle, maintaining your routine health checks, and seeing your health care professional for assessment can help identify the cause and ensure you get the right treatment to feel more comfortable and in control.

Since I've started menopause, sex has become painful and not something I enjoy anymore. Is this normal?

When menopause or perimenopause begin, oestrogen levels drop or fluctuate, causing several physical changes in the vagina and surrounding tissues that can have sex uncomfortable or even painful. You may experience vaginal dryness and less natural lubrication, which can make intercourse uncomfortable. The vaginal tissues may become thinner and more fragile, a condition called vaginal atrophy. The area can also feel tighter and less elastic, and as a result, arousal and pleasure may decrease because of the discomfort.

To help relieve these symptoms, you can use a water- or silicone-based lubricant during sex, avoiding any that contain perfume or glycerine. Vaginal moisturisers, such as Replens or Yes!, used a few times a week, can help restore moisture. Your healthcare professional may also recommend low-dose vaginal oestrogen in the form of a cream, ring, or tablet, it's very effective and safe for most women. In addition, pelvic floor therapy and taking more time for arousal can make intimacy more comfortable and enjoyable.

"Irregular or painful periods are common and often treatable, but they shouldn't be ignored"

No matter how much I shower I still can't get rid of an unpleasant odour from my vagina. I haven't been intimate with anyone in over 6 years because I am too embarrassed to let anyone near me. What am I doing wrong?

AA persistent vaginal odour isn't about poor hygiene and it's usually a treatable medical issue. The common causes include:

- Bacterial vaginosis (BV): fishy smell, most common reason.
- Yeast infection: yeasty or bread-like odour, itching.
- Trichomoniasis: strong foul smell, yellow-green discharge.
- Forgotten tampon/object: strong, rotten odour.
- Hormonal changes (like menopause) or medical issues (like diabetes) can also affect odour.

Here's what to do!

- Wash only the outside with water or a mild unscented cleanser (never douche).
- Avoid scented soaps, sprays, or wipes. Even feminine products can affect the Ph so plain water is generally a good idea.
- Wear cotton underwear and keep the area dry.
- Do not over wash or clean, the vagina naturally contains "good" bacteria that keep it clean and balanced.
- See a health care professional, they can do a simple swab and prescribe antibiotics or antifungal treatment if needed.

This is common and not your fault. most women get full relief once the cause is treated.

Be Appy

Symptoms like frequent visits to the toilet, leaking pee, or feeling heavy in your pelvis are common, but shouldn't be considered normal.

The FREE getUBetter app provided by NHS South Yorkshire can help you understand your pelvic health, and manage any related symptoms.

- Instant access 24/7
- Easy-to-follow pelvic floor exercises
- Day-by-day guidance
- Access to local services
- Advice about where to get help, if you need it.

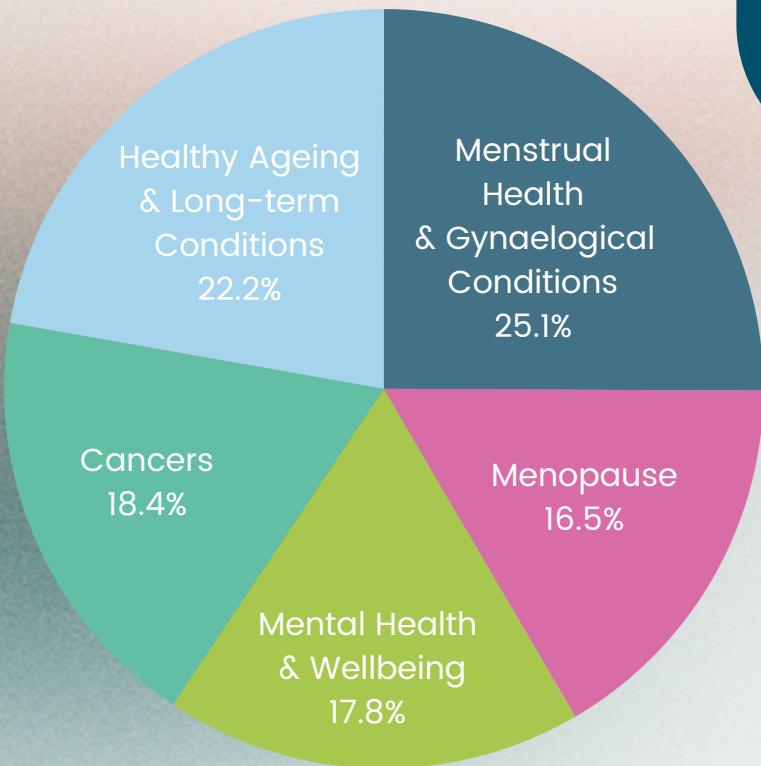
Scan the QR code to access the app or visit this website

app.getubetter.com



What you told us

We asked you to rank a lineup of women's health concerns spotlighted in the Government's Health Strategy, August 2022, based on what matters most to you.



Some women chose more than one top priority as they felt they were just as important as each other.



We asked why you picked your top concern

I have had cancer and i am scared it will reappear

Concerned that health checks stop at a certain age

I think that it has a huge impact on the life of a woman

Issues with menstrual cycle, irregular periods but never given a reason why

Mental health is in crisis and it underpins many physical health issues

My journey with ENDOMETRIOSIS

Kelly* shares her experience

I'd had period issues for years and finally spoke to someone in 2017. At my first appointment, I saw an advanced nurse practitioner (ANP) and was referred for a transvaginal ultrasound to check for ovarian cysts. The scan was clear, but my symptoms worsened.

At my second appointment, a different ANP took bloods and diagnosed me with IBS, advising me to avoid gluten. My symptoms kept worsening, and over the years, I had multiple appointments at my GP practice—always with an ANP, as doctor appointments never matched my working hours. I never felt listened to and received little empathy or support, often leaving in tears.

I was always told my new or worsening symptoms were just IBS and that I needed to live with it. Painful periods were dismissed as a normal part of growing up and linked to IBS, with advice to take paracetamol.

In 2019/20, after many appointments, tests, and medications, I learned about endometriosis. I asked my auntie to attend an appointment with me, as I felt no one was listening to me as a 22-year-old.

At my next appointment, I went alone and explained my worsening IBS symptoms and my concerns about endometriosis. The ANP said I could only discuss one issue per appointment, so I focused on IBS, the only diagnosis I had. I left in tears.

My auntie then had to advocate for referrals to gynaecology and gastroenterology at Barnsley Hospital.



**My periods
were
unbearable
and I was
in so much
pain**

Due to previous misdiagnosis of my period issues as IBS, my referral to the gynaecology team was initially rejected, leading to me needing another GP appointment. Although the referral was accepted in early 2020, it faced delays from the COVID-19 pandemic.

My worsening symptoms led me to pay £150 to see an endometriosis specialist, who added me to the NHS waiting list for a laparoscopy in December 2020. The surgery results were clear, but I received no follow-up care as details weren't shared with my GP.

Barnsley Hospital discharged me despite ongoing symptoms. One gynaecologist suggested inducing early menopause to diagnose a gynaecological issue, but I advocated for an MRI, which he agreed to for peace of mind despite ruling out endometriosis.

The MRI, done in October 2021, revealed both adenomyomatosis and endometriosis—confirmed during a phone appointment four months later.

I felt no one was listening to me



After my MRI results, clinicians' views changed, with some acknowledging that endometriosis can be overlooked during surgery.

I spoke with several gynaecologists at Barnsley Hospital, but faced various issues: one refused surgery too soon, another wouldn't operate if endo was found on my bowel, and a third insisted on hormonal treatment despite my choice against it. Some provided false information, like claiming pregnancy is a cure.

After disappointing appointments, I expressed concerns to my GP about missed endometriosis and requested a referral to the Sheffield Endometriosis Centre. However, the GP was condescending, offered incorrect advice, and questioned my diagnosis, leaving me in tears again.

After I complained to the practice manager, the response I got was dismissive, so I decided not to chase it. I just wanted to get help for my problems.

I ended up paying £250 to see a private endometriosis doctor in Sheffield. He agreed to do another laparoscopy surgery because the notes and images from my last surgery were "quite frankly useless" in his own words.

I am now playing the waiting game for this second surgery to find my MRI findings and excise the tissue. A doctor has explained the COVID-19 backlog is extremely long and I expect a lengthy wait.

After six years of an IBS diagnosis, my gastro doctor doubts its accuracy due to not meeting NICE criteria. I feel that more serious attention to my pain could have led to timely answers and support, potentially avoiding unnecessary surgeries.

In Barnsley, there is a lack of support for Endometriosis and Adenomyosis, with outdated resources from Endometrium UK and misleading information from some webinars.

I advocate for systemic changes in the management of these conditions, including improved referrals, faster diagnoses, and better education for clinicians and communities about the nature of Endometriosis as a chronic disease, not just a menstrual issue.

I share my journey on Instagram, knowing that while my experience may not be the most severe, it reflects the challenges faced by many in Barnsley and South Yorkshire.

Update from September '25

I was added to the Sheffield surgical waiting list in Autumn 2022 and underwent laparoscopy almost a year later. Initially, I was informed that endometriosis was found, but later, the surgical team indicated that no obvious endometriosis was seen. They ablated two areas of "suspicious" tissue and took a biopsy, which ultimately tested negative for endometriosis. I discovered that "diathermy artefact" from the ablation might have affected the biopsy's accuracy, and the biopsy came from a different area than where my MRI indicated potential endometriosis.

My own research revealed that "blebs" might indicate superficial endometriosis, but not all surgeons recognize them. I felt disappointed that the suspicious areas weren't biopsied before ablation, and that there were discrepancies in the surgical and histology reports regarding the biopsy site. I still lack clear answers about the "suspicious tissue" and the thickening of my USL seen on the MRI.

While I experienced significant symptom relief post-surgery, my symptoms are now returning nearly two years later, and I have not received a follow-up appointment, likely due to the consultant's long-term absence. This has led to a loss of trust in gynaecology and NHS services for endometriosis, prompting me to consider private imaging or surgery abroad in the future.

My follow-up care has primarily involved hormonal medication, which I have declined due to past side effects and lack of a confirmed diagnosis. An upsetting appointment left me without a care plan or support for my returning pelvic pain, and the dismissive attitude towards women's health concerns was disheartening.

Mythbusting

Here at Spectrum we offer compassionate and confidential advice, support and treatment around contraception, pregnancy, sexually transmitted infections (STIs), HIV and more.

All our highly skilled clinical staff are dual trained to provide support for both contraception and STIs.

Our outreach workers support and engage with key service user and vulnerable groups, ranging from young people, SEND, vulnerable adults and sex workers.

Brought to you by

Spectrum
Community Health CIC



Myth

The morning after pill is expensive

I'd know if I had an STI because I'd have symptoms

If I'm on contraception I don't need to use a condom

I'm menopausal so won't get pregnant

HIV is a "death sentence"

Truth

From 29 October 2025 all pharmacies should be offering this free of charge for any age

Many STIs are asymptomatic, meaning people can carry and transmit them without knowing.
(early stages of HIV & Syphilis have no symptoms as does HPV, Herpes, Chlamydia & Gonorrhoea)

Hormonal contraception and the IUD (copper coil) do not protect against STI's

Fertility decreases with age but getting pregnant during perimenopause is still possible

With modern treatment, people living with HIV can have long, healthy lives and cannot transmit HIV sexually if their viral load is undetectable (U=U: Undetectable = Untransmittable)

Healthy Mind - Healthy Body

Brought to you by



**BARNESLEY FC
COMMUNITY TRUST**

Barnsley Fc Community Trust aims to use the power of Barnsley Football Club to inspire , improve and positively change lives in our community.

We have a number of programmes aimed at improving both the mental and physical health of our participants whilst also helping to reduce social isolation.

These programmes include a number of women only groups, including, postnatal sessions, Fit Red Ladies (coming soon in the North Area of Barnsley) and Healthy Mind Healthy Body.



Walking

A simple 20-30 minute walk, especially outdoors, can increase endorphins, reduce stress, and clear your mind. Sunlight and fresh air add an extra mood boost.

Dancing

Just a few minutes of dancing to your favourite music can elevate your heart rate, boost your mood, and release tension through movement and rhythm.

Bodyweight exercises

Short sets of squats, lunges, or push-ups at home boost energy and confidence by triggering feel-good brain chemicals like dopamine and serotonin. Bodyweight exercises help reduce the risk of osteoporosis in later life.

Yoga or Tai Chi

These low-impact movements combine breath and motion, helping reduce cortisol. Cortisol is a stress hormone and too much in your system can lead to weight gain. Yoga and Tai Chi also promote a calm, grounded mindset.

Healthy Mind Healthy Body

Every Monday

7 - 8.30 pm

Free to attend

Indoor Training Centre, Grove Street, Barnsley, S71 1ET

Stretching

Gentle stretching relieves muscle tension, improves circulation, and helps calm the nervous system-great for managing anxiety and improving focus.

Is menopause ruining your sleep?

Try these tips for a more restful night

Menopause impacts sleep due to hormonal changes, especially reduced estrogen and progesterone levels, leading to symptoms like hot flushes, night sweats, and mood swings that disrupt sleep. Women may struggle with falling asleep, staying asleep, or waking early, and may face increased risks of insomnia, sleep apnea, and restless legs syndrome, resulting in fatigue and diminished well-being.

Keep your bedroom cool and comfortable

Lower the room temperature, use breathable bedding, and dress in light sleepwear to help manage night sweats and hot flushes.

Create a calming bedtime routine

Wind down with relaxing activities such as reading, taking a warm (not hot) bath, or listening to soothing music to signal to your body that it's time to sleep.

Maintain a consistent sleep schedule

Go to bed and wake up at the same time every day, even on weekends, to regulate your body's internal clock.

Limit caffeine, alcohol, and heavy meals before bed

These can interfere with sleep quality and worsen hot flushes or heartburn.

If you share a bed, the Scandinavian sleep method might be really helpful. Instead of one big double quilt, you use two individual quilts. This way, everyone gets what they want, and there's no fighting over the covers.

More information around menopause can be found on the NHS website along with links to useful websites.

If you're struggling with symptoms please seek advice from your GP Practice. It's important to find the treatment that works best for you.



Your Body's Best Investment: A Cancer Screening

Screening for bowel, breast, and cervical cancer is important because it can find cancer early, when it's easier to treat and the chances of recovery are much higher. It can also help prevent some cancers by detecting early changes before they become serious.

We know that the idea of screening can be scary, which is why we're sharing our own experiences—to show that you're not alone and to help make the process feel less intimidating.



I was a bit nervous going for my first breast screening appointment, as I didn't know what to expect but honestly it was a breeze and all in under 20 minutes.

All the staff are friendly, they are all female and put you at ease immediately. I was called into a small room with the scanner and a curtained off area in the corner. I was asked to go behind the curtain and remove any clothing, including my bra, from the top half of my body.

I then stood in front of the scanning machine and the Radiographer positioned my body at an angle to the scanner. She made some adjustments to the height and placed my left breast on the scanner. She then took an image, came back and re-positioned me and then repeated the same on my right hand side.

It was over in a matter of minutes and I was then able to get dressed and the Radiographer explained that the results would be sent to my GP in around 2 weeks time.



I recently had a smear test, and while I was a bit nervous beforehand, I reminded myself that this isn't my first rodeo!

The nurses have always been really friendly and welcoming from the moment I'm called in the room. It's really easy to overthink when you've got someone down in that area but they're there to do a job and not judge the neatness of your bikini line. Remember they've seen it all before.....many times.

After going behind a curtain to remove clothing and underwear on your bottom half, the nurse asked me to lay on the examining bed and cover myself with a paper sheet she'd left out for me . When I was laid on the bed she came behind the curtain and told me to put my heels up to my bum and keep my knees apart. She warned me the speculum they use might feel cold and to keep relaxed. This discomfort while she took a sample lasted less than 10 seconds, she removed the speculum and left me behind the curtain to get redressed.

The results came to me in the post in less than 2 weeks and just like that it's all over for another 5 years.

19%

of people that completed our Women's Health Survey, said Cancer was the most important issue to them

When the 'Bowel Cancer Screening Programme' letter lands on your doormat...

Turning 54 years old and my little gift from the NHS was a bowel screening test. I couldn't believe I'd actually reached this stage of my life but it was much simpler than I'd anticipated.

It was something I never really gave much consideration to, but actually, it turns out that catching the poo is easy to do. "Read all instructions carefully before catching the poop" would be my advice as the vial is small and needs dating, once your sample is in there (only a tiny amount is needed on the little spatula) it's straight into the envelope to be posted off for testing. All instructions are clearly described on the packaging which makes it a simple process to follow.

Don't delay, test today. The results were back after 5 days so no time to worry and now I know all is clear and I've nothing to fear.



A message from Louise....



Louise is a beloved and prominent figure in the Barnsley Borough, recognized for her dedicated work with the How's Thi Ticker team.

As a passionate advocate for health screening, she has empowered countless individuals to take proactive measures towards improving their health, leaving a positive mark on our communities.

Now, Louise is facing her own health challenge, and true to her resilient nature, she has chosen to share her journey with honesty and bravery. Her transparency is helping to raise awareness and reduce the stigma surrounding health issues, reminding us all of the importance of speaking out.

From everyone at Healthwatch Barnsley, we extend our love, admiration, and heartfelt wishes to Louise

Well here's a post I never thought I'd write. A few weeks ago I got diagnosed with cancer (anal to be precise) well I couldn't have something bog standard could I. It's rare but treatable with chemo and radiotherapy, which I start in about 3/4 weeks every day at Weston Park for 5 and 1/2 weeks. The next few months are going to challenging and I'm going to feel rough, normally I love a challenge but not this one!!

The reason I'm putting it out there, I had no symptoms, I've not felt unwell, I just had a small lump at the top of my leg where I'd been stung by a bee 🐝 this June, I went to the docs expecting to come out with antibiotics 💊 and I came out with an urgent referral to hospital!!! The NHS and Macmillan staff have been amazing so far BTW. 🏥 Please get any unusual lumps/bumps/pain checked out as soon as you can, I know getting an appointment with the docs is like finding a unicorn 🦄 in a haystack sometimes, but be persistent. If it can happen to me it can happen to anyone. I'm fit, healthy, look after myself, eat well, I speak to others every day about doing the same, it's part of my job. 🤗

Being healthy will give me an advantage of responding to treatment and recovering. I'll not be the first or last person this will happen to, 1 in 2 of us will get a diagnosis at some point in our lives. I don't want any kind of pity party, if you see me I'm happy to talk. Please look after yourselves and get checked, I'll keep you posted on how I'm doing. Thank you to everyone that's supported me so far, you know who you are; family, friends, work colleagues. I couldn't get through this without you all.





Useful Services

These services may be able to help with some of the conditions mentioned in this magazine.

if you're not sure where to turn for support you should always get in touch with your GP practice.

Mental Health Support

Barnsley Recovery and Wellbeing College

Phone: 01226 730433

Email: barnsley.recoverycollege@swyt.nhs

Website: barnsleyrecoverycollege.nhs.uk

Kooth – Mental Health Support for ages 10 – 25

Website: www.kooth.com

Barnsley Talking Therapies

Phone: 01226 644900

Email: barnsley.talkingtherapies@swyt.nhs.uk

Mental Health Matters –

Barnsley Support Hub

Phone: 07855 971 634

Email: barnsleysuporthub.mhm@nhs.net

Opening hours: Thursday-Monday, 6pm-11pm

Rotherham and Barnsley MIND

Phone: 01226 211188

Email: contactus@rbmind.co.uk

Website: rbmind.co.uk

LGBTQ+ Support

Barnsley LGBTQA+ Forum

Email: BarnsleyLGBTQad@hotmail.com

Website:

facebook.com/groups/BarnsleyLGBTForum

Trans Barnsley

Email: transbarnsley@hotmail.com

Sexual and Gynaecological Health

Spectrum

Phone: 0800 055 6442

Website: <https://spectrum-sexualhealth.org.uk/clinic/barnsley-sexual-health-services>

Health and Wellbeing and Healthy Ageing

Age UK Barnsley

Phone: 01226 776820

Email: enquiries@ageukbarnsley.org.uk

Barnsley Carers Service

Phone: 01226 288772

Email: barnsleycarers@cloverleaf-advocacy.co.uk

Barnsley FC Community Trust

Phone: 01226 2111333

Website: barnsleyfccommunity.co.uk

Creative Recovery

Phone: 01226 805885

Email: wearecreativerecover@gmail.com

Long Term Condition and Cancer Support

The Well - Complimentary therapy for those affected by cancer

Phone: 01226 733019

The Orangary - Barnsley Hospice

Support and wellbeing service for people living with a life-limiting illness

Phone: 01226 244244

Website: www.barnsleyhospice.org

Support for Sexual Violence and Domestic Abuse

BSARCS - Barnsley Sexual Abuse and Rape Crisis Services

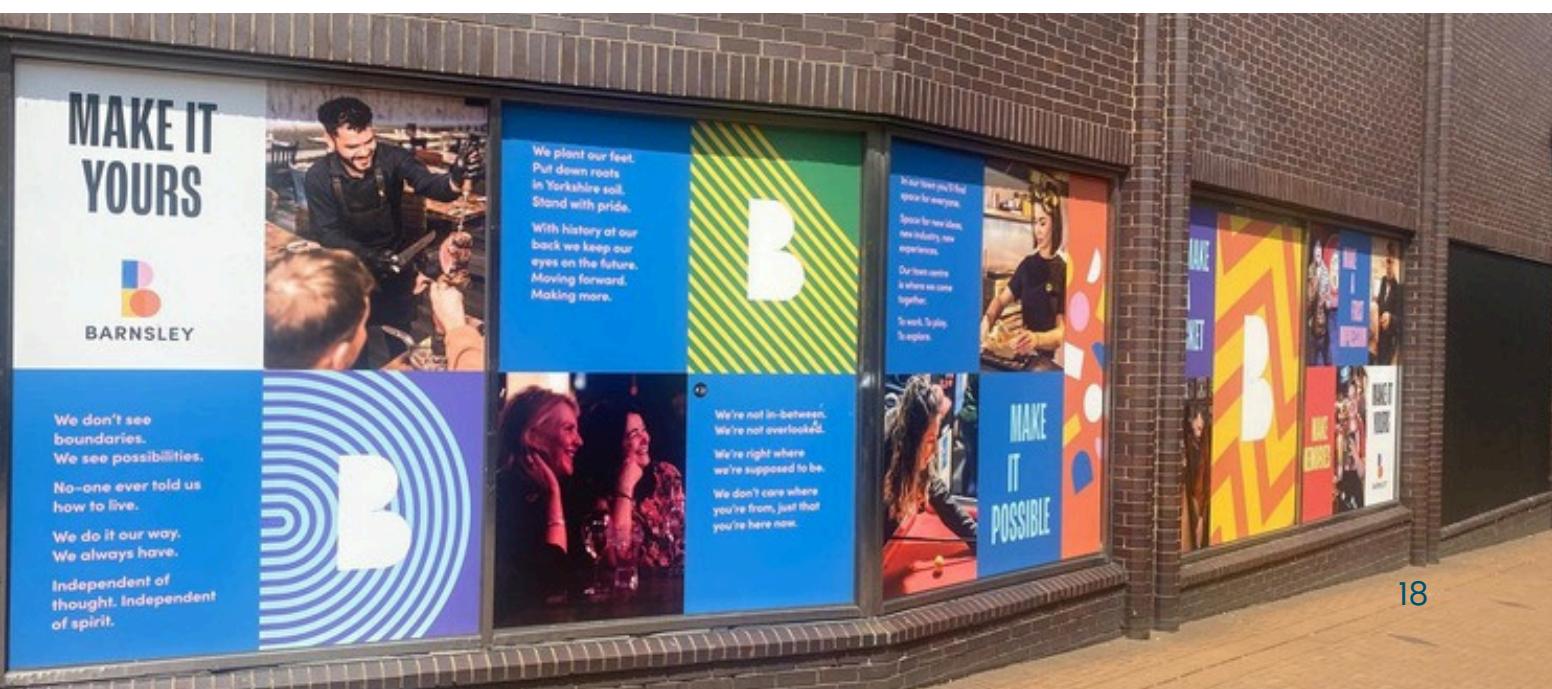
Phone: 01226 320140

Website: www.bsarcs.org.uk

IDAS - Independent Domestic Abuse Services

Phone: 03000 110110

Website: idas.org.uk



Healthwatch Barnsley would like to give Thanks

Healthwatch Warrington

For providing us with the initial questions to use in our Women's Health in Barnsley survey

Helen Lavender, Advanced Nurse Practitioner

For being our agony aunt and giving us some great information on womens health

Andy Simms and Elaine Gallagher, Spectrum Community Health

For being our myth busters and the work you do in the community to spread awareness

Kelly

For sharing your journey with endometriosis and we wish you nothing but a happy healthy life for the future

Sean Margison, Barnsley FC Community Trust

For your tips on how to use exercise to help our mental health and the work you do to support women in the community

Louise Hunt, How's thi ticker

For allowing us to share your story even further and hopefully encourage women not to ignore the signs when something is wrong



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From Penistone to Goldthorpe and everywhere in between.
Together, we are making health and social care better!

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