

BREAST CANCER

Introduction

Cancer of breast is one of the most prevalent cancers in women. It can run in families. Early detection is important to treat adequately. It does not cause symptoms in the early stages in some patients and hence routine examination of breast and screening are needed particularly in high risk patients.

Facts about Breast Cancer

In Canada 1 in 9 women will develop breast cancer in her lifetime. 3% of breast cancers occur in men. Death rate has not changed over the last 20 years. 75% all breast lumps either cancerous or non cancerous are diagnosed by self breast examination. 8 out of ten are not cancerous. 70% of women diagnosed with breast cancer have no known risk factors. Smallest cancerous lump of 2 to 3mm carries one billion cells.

Risks of Breast cancer

Breast cancer like any other form of cancer can affect any woman. Risk of breast cancer is increased in women aged 50 and above. Family history of breast cancer particularly in both breasts carries a high risk. Six times greater risk if ones' mother or sister had breast cancer before menopause. Ten times greater risk if ones mother or sister had cancer in both the breasts. Other conditions contributing to the risk include early onset of menarche (first menstrual period), women with no children, and women who had pregnancy at an advanced age. Obesity and smoking also increases the risk. There is a minimal risk after taking hormone replacement therapy for 4 years.

Symptoms

Lump in the breast is an alarming situation to any woman. Not all lumps are cancerous. Women can get lumps during and around menstrual period. Some young women can develop benign lumps. Since early detection can lead to maximal cure it is important to know the ways to identify it. There are three simple ways.

1. Self Breast examination: Ask your doctor, pharmacist or the nearby hospital breast screening clinic for a leaflet about breast self examination. Examination can be done once a month while in shower with soap hand 4th to 6th day after the menstrual period. Look and observe in the mirror for any difference in the nipples regarding size shape or skin dimpling. Any discharge from the nipple particularly blood should be reported to your physician and investigated.
2. Annual Physical examination by your physician.
3. Mammogram at the nearby breast screening clinic. Mammogram is a simple X-ray of the breast which can detect the cancer most of the time at a very early age. At most of the screening clinics in Ontario a nurse examiner will clinically conduct breast exam as well.

Mammogram schedule as per age:

40-49—According to Physician and patient discrepancy

50-74---Once in 2 years

Over 74- Usually not needed.

If there is a family history then mammogram should be done at least 5years before the earliest age of onset.

Treatment: Once confirmed by biopsy (Piece of breast excised and examined under microscope) the treatment could be either surgery, radiation chemotherapy or a combination of these three. Surgery could be removal of lump or the breast with or without the lymph nodes. Radiation after surgery or as a palliative measure can be performed. Chemotherapy is giving courses of anticancer drugs.

Conclusion: *Early detection is important. It should be strongly emphasized that everywoman need to do self exam or undergo screening particularly if there is a strong family history of breast cancer present. If not detected early it can spread to many parts of the body and shorten the life expectancy. Most of Asian woman feel shy to discuss personal problems even with their own physicians. Please try to find a woman physician and tell them the problem so that investigation and treatment can be started early*

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