

# BREAST CANCER

The scenario is a common one: a woman goes alone for an annual mammogram, thinking that it is routine, only to be told that “something” has been found. This news can be devastating.

In one brief moment the woman has gone from being seemingly healthy, to possibly becoming part of the 203,000+ women who will be diagnosed with breast cancer this year.

Researchers estimate that one in eight women will develop some form of breast cancer in their lifetime. For women, it is currently the number one type of cancer, and is the second leading cause of cancer death.

While these statistics seem grim, the good news is that there has been significant improvement in the rates of survivability. According to the American Cancer Society, five-year survival rates have increased from only 72% in the 1940s, to 97% in 2002.

Contributing to this improvement is the heightened public awareness of the risks, the signs and symptoms, and a diligence in monthly breast exams and annual mammograms. Earlier diagnosis has made a tremendous difference in the success of treatment. Additionally, earlier detection has given women greater options in the types of treatment that can be used.

The two most common forms of breast cancer are: ductal carcinoma, which begins in the lining of the ducts that carries milk to the nipple; and lobular carcinoma, forming in the lobules, which end in dozens of bulbs that produce milk.

The risk of developing breast cancer increases as women age. Most breast cancer cases involve women over the age of 50. However, it can develop in younger women.

Those who have first-degree relatives, such as a mother, sister, and daughter, with breast cancer are considered to be at a high risk.

Other risks include: menstruation before age 12; menopause after age 55; never bearing children or having the first child after age 30; consuming a high fat diet; and drinking alcohol. While these do not guarantee the development of breast cancer, they do bear an increased risk.

Early breast cancer usually does not cause pain or symptoms. Many times, abnormalities are discovered during a routine mammogram.

As breast cancer progresses, a lump or thickening may be detected in or near the breast, or in the underarm area. Additional symptoms may include: a change in the size or shape of the breast; a discharge from the nipple; and changes in the color or feel of the skin of the breast, areola, or nipple.

Treatment is determined by the stage of progression, as well as by the patient's own preferences. The most common treatment is surgery, either a lumpectomy (which attempts to spare as much of the breast as possible) or a mastectomy (which removes the entire breast). Some or all of the adjoining lymph nodes may be removed during surgery.

In order to spare a patient from extensive surgery, many breast surgeons have embraced the use of sentinel node biopsy. This minimally invasive procedure involves removing the sentinel lymph nodes, which are first to receive drainage of fluid and cells from the breast area. If the biopsied nodes are cancerous, then the rest of the nodes must be removed. If there isn't any sign of cancer, studies have shown that the rest are generally cancer-free, and may remain intact.

Radiation therapy is often part of the treatment plan following surgery. The intent is to kill any remaining microscopic cancer cells. The combination of procedures, such as lumpectomy and radiation therapy, has been proven to be as effective as a radical mastectomy. Radiation may also be used to shrink the tumors, and/or alleviate pain and symptoms if the cancer has metastasized (spread), or reoccurs.

Other adjuvant treatments include chemotherapy and hormone therapy. They may also be used following surgery to treat metastatic breast cancer or to kill residual cancerous cells.

## Oral Cancer

- A sore on the lip or in the mouth that does not heal
- A lump on the lip or in the mouth or throat
- A white or red patch on the gums, tongue, or lining of the mouth
- Unusual bleeding, pain, or numbness in the mouth
- A sore throat that does not go away, or a feeling that something is caught in the throat
- Difficulty or pain with chewing or swallowing
- Swelling of the jaw that causes dentures to fit poorly or become uncomfortable
- A change in the voice
- Pain in the ear

## Skin Cancer

- New growth or sore that doesn't heal
- Not all skin cancers look the same they can be:
  - A small, smooth, shiny, pale, or waxy lump
  - A firm, red lump
  - A lump that bleeds or develops a crust
  - Can start as a flat, red spot that is rough, dry or scaly
- Areas most affected are the head, face, neck, hands, and arms, but can appear anywhere
- Actinic keratosis, a precancerous condition, appears as rough, red or brown scaly patches on the Skin

## Cervical Cancer

- Abnormal bleeding
  - May start and stop between regular menstrual periods
  - May occur after sexual intercourse or pelvic exam
  - Bleeding after menopause
- Increased vaginal discharge

## Ovarian Cancer

- Hard to find early
- Pelvic or abdominal pain or discomfort, and/or feeling of fullness
- Bloating/swelling in the abdomen/unexplained weight gain you look suddenly pregnant
- Weight loss/appetite loss
- Feeling tired
- Vague but persistent gastrointestinal upsets such as gas, nausea and indigestion
- Backache
- Cramps
- Bladder or other urinary problems (frequency and/or urgency of urination in absence of an infection)
- Unexplained changes in bowel habits
- Hard-feeling ovaries
- Unusual vaginal bleeding
- Pain during intercourse

## Endometrial Cancer

- Abnormal vaginal bleeding after menopause
- Difficult or painful urination
- Pain during intercourse
- Pain in the pelvic area

## Stomach Cancer

- Indigestion or a burning sensation (heartburn)
- Discomfort or pain in the abdomen
- Nausea and vomiting
- Diarrhea or constipation
- Bloating of the stomach after meals
- Loss of appetite
- Weakness and fatigue
- Bleeding (vomiting blood or having blood in the stool)