

## BREAST CANCER

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<p>As a symbol of womanhood, the breasts holds significant meaning to the female sex. Thus the thought of losing this vital part of the body severerly erodes a woman's self image. This fear is generally associated with breast cancer, a most dreaded disease that carries physical and emotional trauma.</p> <p>Worldwide statistics show that breast cancer affects approximately one out of 12 women. Although rare, this cancer affects men as well. The American Cancer Society estimates that 1% of all breast cancer cases affect males.</p> <p>In Malaysia, breast cancer is the leading cause of cancer deaths in women.</p> <p>According to data provided by the National Cancer Registry, in 2003, there were 3,738 reported breast cancer cases, making it the most commonly diagnosed cancer in women. It accounted for 31% of female cancer cases.</p> <p>Breast cancer was the commonest cancer in all ethnic groups and all age groups in females from the age of 15 years. Of the cases diagnosed in 2003, 64 % were in women between 40 and 60 years of age.</p> <p>Out of 100,000 population, Chinese women in this age group had the highest risk with the percentage of 59% followed by Indian women and Malay women.</p>	<p>Graphic: Chart - Breast cancer cases women.jpg</p> <p>Graphic: Chart - Breast cancer cases women-by age.jpg</p> <p>Graphic: Chart - Breast cancer cases women-by race.jpg</p> <p><i>Source: National Cancer Registry Report, 2003 <a href="http://www.acrm.org.my/crc/">www.acrm.org.my/crc/</a></i></p>
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<p>There are many myths related to the causes of breast cancer such as wearing under-wired bras and using antiperspirants on the underarms.</p> <p>The actual causes of breast cancer are still unknown, but several risk factors have been identified. Let 's look at the major risk factors.</p> <p><b>Medical &amp; Family History</b> Those who contract cancer in one breast have 4 times the risk of developing cancer in the other breast. Those with family history of breast cancer are also at risk. The risk increases fourfold if two first degree relatives are affected.</p> <p><b>Use of Oral Contraceptives &amp; Hormone Replacement Therapies</b> The prolonged use of birth control pills and hormone replacement therapies (HRT) is linked to heightened risk of breast cancer by 1.2 and 1.3 times respectively. This is because the hormone estrogen is believed to stimulate the growth of breast cancer cells.</p> <p><b>Diet &amp; Obesity</b> Excessive consumption of saturated fat can increase the risk of getting breast cancer. Obesity has been found to be a breast cancer risk in studies, especially for women after menopause. Although the ovaries produce most of estrogen, fat tissue produces a small amount of estrogen. Having more fat tissue can increase your estrogen levels and increase your likelihood of developing breast cancer.</p> <p>Other risk factors are nulliparity or not having children, abortion of the first pregnancy, early onset of menstruation (before age 12) and late menopause (after age 55).</p>	<p>Video of Birth control pills</p> <p>Video of Obese women</p>
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Breast cancer begins with an uncontrolled growth of cells in the breast area, which eventually forms a tumour. The most common visible symptom of breast cancer is a painless lump in the breast. This is the first indicator for breast cancer for over 90% of women.

There are also other symptoms that could be telltale signs of breast cancer. They often involve the changes on the breast, nipple and arm. The symptoms are:

- Change of size or shape of breast or nipple.
- Dimpling of the skin.
- Nipple becoming inverted.
- Thickening of breast or nipple.
- Swelling in the armpit.

There are also rare symptoms such as blood stained discharge form nipple, and rashes on the nipple and surrounding skin.

Graphic: Breast cancer-symptoms.jpg  
source: [www.4women.gov/faq/bsefaq.htm](http://www.4women.gov/faq/bsefaq.htm)

Graphic: mammogram top.jpg  
Mri.jpg

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<p>Regular breast self examination is a good technique for early detection of lumps in the breast. However, not all lumps detected are cancerous.</p> <p>Many women also experience pain or discomfort in their breasts especially before their periods. Until properly checked, it should not be a cause of apprehension.</p> <p>Dato' Dr. Suseela Nair, a consultant breast surgeon tells us more about breast examinations.</p> <ol style="list-style-type: none"> <li>1. Is it true that 9 out of 10 breast lumps in younger women (below 40) are benign breast conditions?</li> <li>2. What are the common benign breast conditions?</li> <li>3. Can ultrasound and MRI detect the presence of breast lumps for younger women?</li> <li>4. Is a yearly mammogram recommended for women over 40 years old?</li> <li>5. How accurate are the findings of a mammogram and must this be accompanied by a clinical breast examination by a doctor?</li> </ol>	<p>Graphic: Breast Self-Examination 1.jpg Breast Self-Examination 2 &amp; 3.jpg Breast Self-Examination 4.jpg Breast Self-Examination 5.jpg</p> <p><i>source: <a href="http://www.breastcancer.org">www.breastcancer.org</a></i></p> <p>Video - Interview with Dato' Dr. Suseela Nair</p> <p>Contact: 207, Medical Consulting Suite Gleaneagles Intan Medical Centre Tel: 03-42532795/42552990</p>
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A mammogram, ultrasound or MRI is not enough to establish an initial diagnosis of cancer. A diagnosis requires analysis of cancer cells under a microscope. This entails a biopsy, a small operation that removes tissue from the breast lump. The microscopic analysis helps doctors to determine the size, type, and kind of breast cancer.

Cancer takes years to develop. Depending on the extent of the disease, breast cancer can be divided into four stages.

Prof. Yip Cheng Har, professor and consultant breast surgeon in the Department of Surgery, University Malaya Medical Centre gives us more details on the stages of breast cancer.

Question for Dr. Yip:

1. Please explain the various stages of development of breast cancer.
2. From your experience, at which stage do patients normally seek medical treatment?

Video - Interview with Prof. Yip Cheng Har  
Contact: Department of Surgery, University Malaya  
Medical Centre  
Tel: 03-79494422 ext 2070/03-79492830

Audio

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<p>When a diagnosis reveals a cancerous lump, a patient should take into account physical, emotional, psychological needs before deciding on the treatment options. The patient should seek advice from various experts, ie. the surgeon, oncologist, radiotherapist before making a decision.</p> <p>The mainstay of breast cancer treatment is surgery. However, this does not always mean removing an entire breast. Chemotherapy may be implemented to control the spread of the cancer cells to other organs. Some anti-oestrogen drugs may also be used to block the effects of hormones that promote growth of breast cancer cells.</p> <p>When the tumour size is small, the breast can be retained. The tumour together with a margin of normal tissues and lymph nodes in the armpit are removed during lumpectomy. The rest of the breast will then be treated with radiotherapy.</p> <p>Dr. Yip elaborates on when complete breast removal or mastectomy has to be carried out.</p> <p>Questions for Dr.Yip:</p> <ol style="list-style-type: none"> <li>1. Under what conditions is a mastectomy required?</li> <li>2. What are the after-effects of breast removal and how should patients deal with them?</li> <li>3. Do patients have to take follow-up radiotherapy and chemotherapy treatment after surgery?</li> <li>4. How is chemotherapy carried out and what are the side effects?</li> <li>5. Will the patients be given any medication after surgery?</li> </ol>	<p><i>Graphics: Lumpectomy Mastectomy Port for chemotherapy</i></p> <p>Source: <a href="http://www.breastcancer.org">www.breastcancer.org</a></p> <p>Video - Interview with Dr. Yip</p>
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Breast cancer patients should inform their oncologists if they are planning to seek complementary therapies before, during or after treatment or surgery. If possible, the therapist should write a letter or note to inform the doctor about complementary therapies he or she will be doing.

Dr. Mohamed Ishak, president of the Malaysian Society of Complementary Therapies (MSCT), believes that complementary therapies are ideal to strengthen the immune system before conventional treatment with the surgeon or oncologist. Emotional support and dietary advice can be given during treatment. After treatment, the complementary therapist can also help with counselling on diet, exercise and other detoxification procedures.

Dr. Ishak advises patients to seek well trained complementary therapist to avoid getting the wrong advice and getting cheated. Proper counselling and advice should be given by the therapists before he or she handles the patients.

.Questions for Dr. Ishak

1. Are complementary therapies suitable only for patients with stage one and stage two breast cancer?
2. Should patients get approval of an oncologist before seeking such therapies?
3. What is lymphathic massage and how does this help cancer patients?
4. How useful is detoxification for cancer patients?
5. To reduce the risk of recurrence of breast cancer, what are recommended complementary therapies?

Video - Interview with Dr. Mohamed Ishak  
Contact: 6, Jalan Tengker  
Malacca  
Tel: 06-2839396/012-6815878

Video - Lymphatic massage and colon hydrotherapy in progress (Dr. Ishak's clinic)

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Breast cancer is very traumatic for women as it affects them mentally, physically and emotionally. Family support is very vital to see them through the various treatments and later return to normal daily life.

In Malaysia, there are support groups that breast cancer patients can turn to. The Breast Cancer Welfare Association (BCWA), for instance, offers practical information and emotional support to breast cancer patients.

For breast cancer survivors, the key is to prevent recurrence. Diet and lifestyle modifications should be implemented. Regular follow-up examination is important.