BREAST CANCER IS CURABLE

The key is to catch the disease at the early stage

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BREAST cancer is a heterogeneous disease and its prevention remains one of the major challenges faced by women across the globe.



It is the most common cancer in women and the leading cause of cancer deaths among women.

According to the Malaysian National Cancer Registry report (2012-2016), one in 27 women in the country has the risk of developing breast cancer in her lifetime.

It stated that breast cancer was the most common seen in women aged between 25 and 59 years (41.9%), 60 and 74 years (28.8%), while those aged 75 years and above (16.7%).

"Breast cancers are cancers that originate from the breast tissue itself," says Sunway Medical Centre, Sunway City, consultant clinical oncologist Dr Christina Lai Nye Bing.

"There are many types of breast cancer, depending on which type of cell in the breast mutates and becomes cancerous.

"The two most common types of breast cancer are infiltrative ductal carcinoma and infiltrative lobular carcinoma.

"Infiltrative ductal carcinoma comprises 80% of the breast cancer cases that we see, and this type of cancer arises from the cells that line the breast milk ducts.

"Infiltrative lobular carcinoma arises from cells that line the milk producing glands called the lobules in the breast tissue," she explains.

Doctors will identify its staging which helps to describe how much cancer is in the patient's body, and it is determined by several factors, including the size and location of the tumour and whether the cancer has spread to other areas of the patient's body.

Stages of breast cancer

Dr Lai says there are five stages of breast cancer – stage zero to four.

"For patients, stage 1 to 3 are still considered curable but for stage 4 patients, our aim of treatment is to control the cancer for as long as we can and to maintain a reasonable quality of life for our patients with the various treatments available."

She explains that "breast cancer is definitely curable, and the key is to catch it at the early stage."

"Therefore, we strongly advise women to know their family history of cancer and go for regular mammogram and health checkup."

Sunway Medical Centre, Sunway City, consultant breast and endocrine surgeon Dr Wong Mei Wan shares that women have different breast size, shape and colour.

"Women undergoing various cycles of life such as menses, pregnancy and ageing would experience normal changes in size and shape of their breasts.

"It is also normal for some women to experience breast pain or soreness before and during their menses."

Dr Wong explains that "breast abnormalities include a lump or thickened area in the breast that feels distinctly different from the opposite or other normal breast tissues; the lump may be stuck to the skin or chest wall; the lump may persist and doesn't go away or disappear; or the patient may see skin reddening, puckering, dimpling that wasn't there before; or any abnormalities in the nipple such as scaly skin, nipple being pulled inward or bloody nipple discharge."

A woman should seek help immediately if she finds any of these abnormalities, she says.

Self-examination

Dr Wong stresses that women should give importance to breast self-examination.

"With breast self-exam, women can detect signs of breast cancer and seek treatment early," she says, adding that women can seek advice from nurses or health practitioners on how to perform breast self-exam.

The practice includes visual inspection of the breasts to look for any skin puckering, dimpling or any recent change in breast shape, size or asymmetry; checking the nipples for inversion; and using the hands to feel for lumps.

"For women who have regular menses, it's best that this is done after the last day of the menstrual period.

"For menopausal women or those who have irregular menses, they can set a fixed day to perform this routine once a month," she says.

Dr Lai highlights the importance of breast cancer screening which includes annual mammogram, ultrasound and PAP smear.

"Screening aids in detecting cancer at its early stage which is the most treatable and curable stage," she says.

On how breast cancer is diagnosed, Dr Wong explains: "Women with breast cancer commonly come first with a palpable breast lump and the mammogram or breast ultrasound may show signs of breast cancer.

"Some women may not have lumps but mammograms can detect breast cancer. A tissue biopsy is necessary to confirm diagnosis of breast cancer."

Once a patient is diagnosed as having breast cancer, the oncologist will discuss with her on the next step, whether surgery or neoadjuvant chemotherapy, she says.

Treatment

“We do our best to tailor the treatment specifically to each patient, under what we call personalised medicine,” says Dr Lai.

“It’s no longer one size fits all. We must help our patients understand why one may need chemotherapy after surgery, but the next patient may not.

“Sometimes patients struggle to understand why they need further treatment as they believe that the cancerous cells have been removed by surgery and treatment is complete.

“Our responsibility is to educate patients on this and clear up any misconception they may have on cancer treatment.”

The mainstay of breast cancer treatment is surgery, says Dr Lai.

There are other forms of treatment like chemotherapy, targeted therapy, hormonal therapy and radiotherapy which are usually incorporated in the treatment to totally eradicate the cancer.

“This is because microscopic cancer cells can travel through the bloodstream or lymphatics system to spread to other parts of the body,” she says.

“We also offer psychosocial support to patients, especially when they are undergoing treatment.”

Patients will be required to go for follow-up check-ups for five years to spot any relapse, besides being monitored for any long-term side effects of treatment.

“In some cases, we follow up for 10 years, such as patients who need hormonal therapy,” she says.

Risk factors

Ageing, family history, early periods and late menopause that expose women to hormones longer, dense breasts, obesity, sedentary lifestyle, family planning, not breastfeeding or never having a full-term pregnancy are among the risk factors.

Dr Wong says five indicators of good breast health are consistent lumpiness or no breast lumps, clear skin, even temperature, no nipple discharge (except when breastfeeding), and no breast pain.

To achieve good breast health, Dr Wong advocates a healthy diet, regular exercise, maintaining a healthy weight, drinking two to three litres of plain water daily, moderate intake or avoiding alcohol, no smoking and breastfeeding.

Dr Lai points out that various digital outlets have helped to raise awareness on breast cancer and held discussion to dispel unfounded fears and concerns shrouding the disease which have caused women to delay seeking medical consultation.

Breast cancer support groups have organised roadshows, activities, forums and workshops to educate women on the disease, including the need for self-breast examination, and treatment options.

“Breast cancer awareness campaigns like Pink October held annually is another excellent way to promote awareness. More campaigns like this should be organised regularly,“she says.