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Professor Sri

Pink Ribbons

Christmas of 2002 I sat on my grandmother's couch staring at my Aunt Jan in awe. After almost an entire year of aggressive radiation and chemotherapy treatments, my aunt was in remission from breast cancer, the most common type of cancer among women in the United States. Her frail body sat upright on the couch as she candidly spoke with our family about her physical and emotional defeat against this flagitious disease. Her frame had shrunk by at least twenty pounds, but it almost went unnoticed due to the swelling that had occurred from the steroid injections. She complained about her head itching, a result of synthetic (wig) hair wearing against her bare scalp, but expressed excitement about the few lonesome strands of hair that had begun to grow on the top of her head. My aunt had overcome a disease that if left undetected or untreated can easily claim the lives of many women each year.

While I cannot predict or save someone from breast cancer, my mission is to educate people by providing information that will allow them to obtain a better understanding of the disease. Each year, according to the National Cancer Institute, it is estimated that on average 213,000 women are diagnosed with invasive breast cancer. For many women, an early diagnosis can mean the difference between life and death. Ductal Carcinoma in Situ (DCIS), an early diagnosis of breast cancer, is often detected through a mammogram. If left undetected or untreated "...approximately 30 percent of all patients diagnosed with DCIS will develop invasive breast cancer an average of ten years from their original diagnosis" (www.y-me.org). Another early diagnosis, Lobular Carcinoma in Situ (LCIS), can also increase the risk of breast cancer, but studies have shown there is no direct link between LCIS and invasive breast cancer.

When diagnosed with invasive breast cancer, there is always a risk that the cancer might metastasize (spread) to other locations within the body. If this occurs, the risk of developing other types of cancer greatly increases. Infiltrating Lobular Carcinoma (IFC), an invasive form of breast cancer

“...accounts for five percent of all malignant – invasive cancers” (www.y-me.org). This particular type of breast cancer commonly occurs in woman between the ages of 45 and 56. IFC develops as a tumor that “...grows in the terminal (last part) of the lobules where milk is produced. It usually does **not** show up on mammography and may feel like a thickening in the upper-outer quarter of the breast (from the nipple to under the arm) as it infiltrates the walls of the lobules” (www.aicr.org). . The most common type of invasive breast cancer, Infiltrating Ductal Carcinoma (IDC) “...accounts for 70 percent of all breast cancer cases” (www.asco.org). There is almost always a visible lump, and the skin located on the nipple is often retracted. While it is recommend that women 40 years and older should receive annual mammograms, it is also important for women of all ages to perform self breast examinations as often as possible. If a woman detects a lump in her breast/s or is experiencing abnormalities in her breast/s, she should contact a doctor as soon as possible.

Being diagnosed with breast cancer can be extremely worrisome, but continuous medical procedures and discoveries about this disease have allowed scientists, chemists and doctors to provide the best treatment options available to breast cancer patients. Two procedures that are commonly performed on breast cancer patients are mastectomies and lumpectomies. A mastectomy is a procedure whereby the entire breast is removed to prevent the cancerous cells from metastasizing to other locations within the body. A lumpectomy is another procedure whereby the cancerous portion of the breast is removed from the body to prevent further spreading. If the cancer has metastasized, one of the two procedures will most likely be performed and a more aggressive form of treatment will follow. Chemotherapy, radiation, or a combination of both treatments can destroy cancerous cells, preventing further spreading. Side effects that often accompany chemotherapy include nausea, fatigue, a compromised immune system and hair loss. Radiation specifically destroys cancerous cells that have the potential to proliferate. A negative feature that accompanies radiation therapy is that healthy non-cancerous cells (that have the potential to proliferate) are almost always compromised. The possible side effects of radiation therapy include skin irritation, swelling, sunburn-like changes to the skin and fatigue.

Through extensive research scientists have been able to identify possible contributing factors that can affect or possibly onset the development of breast cancer. Understanding the risk factors for breast cancer as well as possible preventatives will inadvertently create awareness that will ultimately save lives. In the article "Molecular Epidemiology and Cancer Prevention," research specialists identify breast cancer as a common cancer with a complex etiology. "Only 50% of the disease is associated with known risk factors including highly penetrant genes and lifestyle factors" (April 2003, Oxford University Press p.1). Research reveals that genetic composition, age, menstrual characteristics, postmenopausal obesity, exogenous estrogen use, alcohol consumption and tobacco exposure are just a few established risk factors that can lead to the development of breast cancer. Dr. Harvey Simon, author of the article "Breast Cancer" points out that "...cancer in women younger than 30 is very rare, accounting for only 1.5% of all breast cancer cases but by the time a woman reaches 50 the odds of developing breast cancer are one in 50" (Simon p. 2). Social and economic factors continue to drive a wedge between the mortality rate amongst African Americans and Caucasians. It is now reported that African American women are twice as likely to die from breast cancer than Caucasian women. Many African American women do not have access to the healthcare benefits that are available to Caucasian women, resulting in an inability to receive annual mammogram screening, therefore greatly increasing the risk of developing terminal breast cancer.

While we do not have all the answers, together we can continue to fight for the cause. Any potentially life threatening disease must be acknowledged. If we continue to educate ourselves and those around us about the implications and severity of breast cancer, we can gain a larger support system, thus creating a voice that will speak for the thousands of men and women who suffer from breast cancer every year.

The information provided in my paper when posted to my website will contain an annotated bibliography with links to every site that I used. This will allow my readers to obtain more information about breast cancer as well as check the credibility of my article. This particular course has given me the necessary tools needed to create a sound and secure site (as error free as possible).