



## YOUNG WOMEN ARE VULNERABLE TO BREAST CANCER

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### ABSTRACT

Breast cancer is now the most common cancer in most cities in India and second most common in the rural areas. Breast cancer has ranked number one cancer among Indian females with age adjusted rate as high 25.8 per 100000 and mortality 12.7 per 100000 women. The incidence of breast cancer is among 20 – 40 age group and young women are becoming vulnerable to breast cancer. The Hindu (1 October 2017). The majority of breast cancer is diagnosed at a relatively advanced stage. The recent emphasis on education about breast cancer, early diagnosis and facilities for treatment are expected to bring about the needed improvement in breast cancer care in India.

**KEYWORDS:** Breast Cancer, metastasis, tumours, self breast examination, mammogram, and mastectomy.

### INTRODUCTION

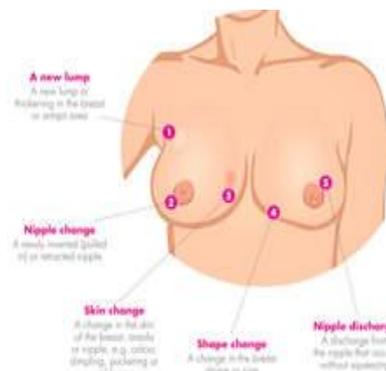
Breast cancer starts when the cells in the breast begin to grow out of control. These cells usually form a tumour. The tumour is malignant (cancer) if the cells can grow into (invade) surrounding tissues or spread (metastasis) to distant areas of the body. Breast cancer can start from different parts of the breast. Most cancer begins in the duct which is called ductal cancers. Some start in the glands called lobular cancer and also small number of cancer start in the other tissues in the breast. These cancers are called sarcomas or lymphomas. Breast cancer can spread when the cancer cell get into the blood or lymph system and carried to the other parts of the body.

### Identifying Clients at Risk

- Altered Body Structure or function due to trauma, pregnancy, recent childbirth, anatomic abnormalities of genitals or disease
- physical, psychosocial, emotional, or sexual abuse; sexual assault;
- Disfiguring conditions, such as burns, skin conditions, birth marks, scars (e.g. mastectomy) and ostomies.
- specific medication therapy that causes sexual problems
- temporary or long term impaired physical ability to perform grooming and maintain sexual attractiveness
- value conflicts between personal belief and religious doctrines
- loss of partner
- lack of knowledge or misinformation about sexual functioning and expression

### Warning Signs of Cancer

- ❖ Elevation of the breast
- ❖ Asymmetry of the breast
- ❖ Bleeding from the nipple
- ❖ orange peel skin
- ❖ nipple retraction
- ❖ Atypical fullness/puckering



**Fig. 1: Warning signs of breast cancer.**

### Women Are Screened for Breast Cancer in 3 Ways

1. Mammography- roentgenography of breasts without injection of contrast medium.
2. Clinical Breast Examination - clinical breast exam is an examination by doctor or nurse, who uses his or her hands to feel for lumps or other changes.
3. Breast self exam - A breast self exam is when you check your own breasts for lumps, changes in size or shape of the breast, or any other changes in the breasts or underarm (armpit).

4. Biopsy - It is a medical test involving the removal of cells or tissues for examination to identify benign or malignant tumors.

90% of the breast cancer is found by self breast self examination. When women discover lumps in their breast at early stage, surgery can save 70 – 80% of proven cases. Its also important to understand that most breast lumps are benign not cancer(malignant).

#### Causes for Non-Cancerous/Benign Tumor

Besides cancer, breast lumps can be caused by:

- ✓ Adenofibroma: A benign tumor of the breast tissue.
- ✓ Fibrocystic breast disease: Painful, lumpy breasts caused by hormonal changes.
- ✓ Intraductalpapilloma: A small benign tumor of the milk ducts.
- ✓ Mammery fat necrosis: Lumps formed by bruished dead or injured fat tissue.

#### Classification of Breast Tumors and Preferred Method of Treatment

Clinical Anatomic Observation	Treatment
Stage I Breast Mass Localized; all nodes negative	<ul style="list-style-type: none"> <li>• Radical mastectomy preferred by surgeons.</li> <li>• Some prefer simple mastectomy preferred with or without postoperative irradiation.</li> </ul>
Stage II Breast Mass Localized; Axillary nodes positive	<ul style="list-style-type: none"> <li>• Radical mastectomy preferred with or without postoperative irradiation.</li> </ul>
Stage III Breast Mass locally extensive; axillary supraclavicular and internal mammary nodes positive	Variable depending on extensiveness: <ul style="list-style-type: none"> <li>• Simple mastectomy with radiation</li> <li>• Simple mastectomy with excision of large axillary nodes</li> <li>• Radiation therapy alone if tumor is fixed to the chest wall</li> </ul>
Stage IV Distant Metastasis such as bones, soft tissues and internal organs	Variable depending upon nature of metastasis, such as bone, soft tissue, etc. <ul style="list-style-type: none"> <li>• Radiation therapy to primary lesion or metastasis</li> <li>• Hormonal therapy, hypophysectomy, adrenalectomy</li> <li>• Chemotherapy</li> <li>• Oophorectomy</li> </ul>

#### Recommendation

- All women age 20years and older perform BSE on a monthly basis. Beginning in their 20's, women should be told about the benefits and limitations of breasts self examination. The importance is prompt reporting of any new breast symptoms to a health professional should be emphasized.
- All women ages 29 to 39 should have clinical examinations every 3 years preferably be part of a periodic health examination.
- All women ages 40 years and older have regular (every 1 to 2 years) mammograms.
- Asymptomatic women ages 40years and older should continue to receive clinical breast examination preferably be part of a periodic health examination annually.
- Women with breast problem, family history of breast cancer must have regular mammograms annually.

#### Prevention of Breast Cancer

1. Exercise seems to protect against breast cancer.
2. Minimize radiation exposure from screening tests (because of ionising radiation can cause DNA mutation in cells).
3. Limit hormone therapy (oral contraceptive pills).
4. Breast feeds:(women who breast feed for 6 months have a 10% reduced risk of death from cancer).
5. Eat right foods: (Antioxidants)(women who had the highest carotenoid levels in their blood had a 19% lower risk of breast cancer -carotenoids are found in

fruits and vegetables such as leafy greens, carrots, and red pepper. The ACS recommends eating 5 or more servings of fruits and veggies a day and limiting red meats, and choosing whole grains helps reduce risk of all type of cancer).

6. Screening for breast cancer is mandatory for women with family history of breast cancer.

#### CONCLUSION

Women can reduce their risk of breast cancer by maintaining a healthy weight, increase physical activity and breast feeding. High intake of citrus fruit has been associated with a 10% reduction in the risk of breast cancer. Also, marine omega-3 poly unsaturated fatty acids appear to reduce the risk. High consumption of soy-based food may reduce the risk of breast cancer. **“The fear should be the fear for delay and not the disease”**. Empower women to screening for breast cancer will prevent morbidity and mortality associated with the disease. Transfer the knowledge regarding warning signals among women is prime responsibility of health care provider.

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