



Breast Cancer

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How Breast Cancer Is Diagnosed

If breast cancer is suspected, imaging tests and a biopsy may be needed.

Breast cancer is often found during a screening mammogram or breast exam, but sometimes a woman notices and reports a change in her breast. If you have a suspicious lump or an abnormal screening result, you will need to have follow-up tests.

Imaging tests are usually the first step. One or more of these tests may be done:

- ▶ **Diagnostic mammography.** A mammogram is basically an X-ray of the breast. For screening mammograms, two pictures are taken of each breast. When mammography is used for diagnosis, pictures are taken from different angles, focusing on the area where an abnormality was found. If any questions remain, an ultrasound or MRI may be done next.
- ▶ **Breast ultrasound.** An ultrasound uses sound waves to create images of the breast tissue that can be viewed on a screen. An ultrasound can show if a lump is solid or fluid-filled (a cyst). Cysts are rarely cancer.
- ▶ **MRI of the breast.** MRI uses radio waves and magnets to create hundreds of detailed images of the breast tissue. It can sometimes help a doctor find a breast lump that can be felt but can't be seen with mammography or ultrasound.



Video Spotlight:

[Advice To Women Newly Diagnosed With Breast Cancer](#)

[Are Some Breast Cancers Different than Others?](#)

If your doctor still has any concerns, you will need to have a biopsy. For this procedure, a doctor removes a sample of the suspicious breast tissue so it can be checked for cancer cells. A biopsy is the only sure way to know if a breast lump is cancer.

It's normal to be worried if you have been told you need a biopsy. But it's important to remember that four out of five women who get breast biopsies do not have cancer. Many other conditions can cause suspicious lumps, and a biopsy can help identify those.

There are different types of biopsy. Your doctor will decide which type is best based on the nature and location of the lump and your overall health.

Biopsy methods include:

- ▶ **Fine needle aspiration.** The doctor uses a very thin needle to remove either fluid from a cyst or tissue from a solid mass. Ultrasound may be used to help the doctor see where to place the needle. If the results are not clear, another type of biopsy will be done.

- ▶ **Core needle biopsy.** The doctor uses a slightly larger needle to remove a few core samples of the abnormal tissue.
- ▶ **Stereotactic core needle biopsy.** For this procedure, your breast is compressed (similar to a mammogram), and X-rays and a computer are used to spot the exact locations to insert the needle.
- ▶ **Surgical biopsy.** This is surgery to remove the tissue for biopsy. In an incisional biopsy, the surgeon takes part of the abnormal tissue. In an excisional biopsy, the entire suspicious area is removed, as well as a small margin of normal tissue. This procedure is usually done in the outpatient section of a hospital. Local anesthesia is used to numb the breast. You may also be given a medication to help you relax and make you drowsy.

Breast Cancer: Dispelling the Myths



Breast cancer myths make it hard to know what to believe. Learn the facts, then forget the rest. Your health may depend on it.

Breast cancer is a common fear among women, and knowledge is the best weapon against fear. Sadly, a lot of bad information is out there, which makes it hard to know what to believe. Here is the truth about some common myths.

Myth: Breast cancer is the leading cause of death in American women.

Fact: Breast cancer is the most common cancer in women, but it is not the main cause of death. Coronary heart disease (which causes heart attack) is by far the number one killer of women in the U.S. It kills more women than all types of cancer combined. Breast cancer is not even the deadliest type of cancer. Lung cancer is the leading cause of cancer deaths in women.

Myth: Young women don't get breast cancer.

Fact: Breast cancer usually strikes after menopause, but it is possible at any age. From ages 30 to 39, an average woman's risk is about one in 233 (only about 0.4 percent). When younger women get breast cancer, it is often because they have inherited a genetic mutation linked with cancer.

Myth: Antiperspirants cause breast cancer.

Fact: Some e-mails claim that substances in antiperspirants and deodorants are absorbed through the skin by way of nicks from shaving and can lead to cancer. Neither the National Cancer Institute nor the FDA has found any link between antiperspirants or deodorants and breast cancer.

Myth: I will get breast cancer because it runs in my family.

Fact: You may be at higher risk for breast cancer if other people in your family have had it. But many women who have a family history of breast cancer never develop it. Your doctor or a genetic counselor can help you understand your personal risk for breast cancer and what steps you can take to lower it.

Myth: I don't have breast cancer in my family, so I won't get it.

Fact: Plenty of women who are diagnosed with breast cancer have no family history of the disease. The fact of being a woman is your main risk factor, and the risk rises as you age, especially after menopause. That's why mammograms and clinical breast exams are important for all women as they get older.

Myth: Bras cause breast cancer.

Fact: This rumor has been spread through e-mail and at least one book. There is no evidence that wearing any type of bra causes breast cancer.

Myth: Only women get breast cancer.

Fact: It's rare, but men can get breast cancer. They account for less than one percent of all breast cancer cases. Men who get breast cancer often have an inherited breast cancer gene mutation.

When in doubt, check it out

Many myths about breast cancer make the rounds through e-mail and the Internet. Don't believe everything you read. Even if it sounds like it could be true, check the facts. These tips can help:

- ▶ **Find reliable sources.** Go to trusted sites for cancer information, such as the National Cancer Institute, the American Cancer Society and myOptumHealth.com. Stay away from any site that sells cancer "cures."
- ▶ **Search out the evidence.** When you hear a claim, look for medical research to support it. Don't rely too much on any single small study. Look for large, well-designed studies conducted through major research centers.
- ▶ **Talk to your doctor.** If you are uncertain about a health claim, ask your doctor at your next visit. Your doctor can help you learn about your risk factors and ways to prevent disease. He or she can also suggest when you should have mammograms and other important screenings.



Treatment Options for Breast Cancer

Learn about surgery and the other main treatments for breast cancer.

There are several treatment options for breast cancer. Often, more than one treatment is used. Here are brief definitions of the main treatments, followed by more-detailed information about each therapy.

- ▶ **Surgery** is usually done to remove the cancer.
- ▶ **Radiation therapy** is the use of high-dose X-rays to kill cancer cells or keep them from dividing and growing.
- ▶ **Chemotherapy** is the use of anti-cancer medications to kill or stop the growth of cancer cells.
- ▶ **Hormonal therapy** is the use of hormones that block the growth of cancer cells.

- ▶ **Biological therapy (targeted therapy or immunotherapy)** uses the immune system to fight cancer

Surgery

Types of surgery that may be done for breast cancer include:

- **Lumpectomy.** A surgeon removes the breast cancer, a little normal breast tissue around the lump, and some lymph nodes under the arm. The surgeon tries to totally remove the cancer while altering the breast as little as possible. Lumpectomy is usually followed by radiation therapy to destroy any remaining cancer cells.

- **Total mastectomy.** The surgeon removes the entire breast. Some lymph nodes under the arm may also be taken out.
- **Partial mastectomy.** This surgery saves as much of the breast as possible. Some breast tissue is removed, as well as the lining over the chest muscles below the tumor and usually some of the lymph nodes under the arm. Radiation therapy usually follows.
- **Modified radical mastectomy.** The surgeon removes the breast, some of the lymph nodes under the arm, the lining over the chest muscles, and sometimes part of the chest wall muscles.
- **Radical mastectomy.** The surgeon removes the breast, chest muscles, and all the lymph nodes under the arm. This was the standard operation for many years, but now it is used only rarely when the cancer is large or has spread to the chest muscles.
- **Sentinel node biopsy.** The surgeon removes the lymph nodes close to the tumor to check whether the cancer is local or has spread (metastasized). If no cancer is found in these nodes, the surgeon may not need to take out any other lymph nodes.

Radiation therapy

High-energy X-rays are used to destroy cancer cells that might still be present in the breast tissue. Radiation therapy is often used after a lumpectomy or mastectomy, but it is usually delayed until the breast has time to heal.

Possible side effects include fatigue, breast swelling, and skin reactions, such as itching, redness, and peeling. Radiation to the breast does not cause hair loss, vomiting, or diarrhea.

Chemotherapy

Even when a lump is small, cancer cells may have broken off and spread outside the breast. Doctors can use chemotherapy to destroy them, using either a single drug or a combination of drugs.

Chemotherapy medications are often injected into the bloodstream through a needle in a vein, but sometimes they are given as a pill.

Possible side effects vary depending on the medication and dose, but may include hair loss, loss of appetite, mouth sores, nausea, vomiting, diarrhea, fatigue, and infections.



Hormonal therapy

Some tumors rely on hormones to grow, so any remaining cancer cells may continue to be stimulated by your hormones. Hormonal therapy can prevent your hormones from reaching any remaining cancer cells.

Tamoxifen is one of the most common drugs used for hormonal therapy. Estrogen stimulates the growth of some tumors. Tamoxifen keeps estrogen from binding to cancer cells. The benefits are generally considered to far outweigh the risks, but you should be aware that tamoxifen use can increase the risk of uterine cancer.

Possible side effects of hormonal therapy include hot flashes, fatigue, vaginal dryness or spotting, and mood problems.

Biological therapy

Antibodies are proteins made by the immune system that are directed against foreign and infectious agents, called antigens. Monoclonal antibodies are drugs that provide specific anti-tumor action within the human body. Trastuzumab (Herceptin) is a monoclonal antibody that is often used along with chemotherapy to treat HER2-positive breast cancer. About one in four women with breast cancer have this type.

Biological therapy is also called targeted therapy, or immunotherapy.

Possible side effects include fever, nausea, vomiting, weakness, and diarrhea. There is also a small risk of heart damage that could lead to heart failure.

Finding Support After Breast Cancer

Resources and support groups are available for survivors of breast cancer and their families.

You just completed your treatment for breast cancer. You have faced one of life's greatest challenges – so far, so good. But the journey isn't over. The ease of getting back to your day-to-day life may depend on your personality, condition, and other factors.

No matter how secure or worried you feel, finding support can only help. Your hospital may offer support groups or psychological counseling. There are also many other associations and groups that can help you during this troubling time. Many are led by women who have survived breast cancer and have dedicated their lives to helping others.

A partial list of resources follows. These groups can put you in touch with others. Many people are eager to help, given the chance.

Support resources

- ▶ **The National Cancer Institute's Cancer Information Service** provides specialists to answer questions, provide information, and help you find a breast cancer support group in your community. Call 800-4-CANCER (422-6237).
- ▶ **Y-ME National Breast Cancer Organization** offers many services, including support groups and a wig and prosthetics bank. It also hosts YourShoes, a free, anonymous, 24-hour hotline hosted by trained peer counselors who are breast cancer survivors. Information and support is offered to anyone who has questions or concerns about breast cancer. You can be matched with a peer counselor who is the same age, or who has had the same diagnosis or other experiences as your own. Call 1-800-221-2141 (English) or 1-800-986-9505 (Spanish). Interpreters are available for those who speak other languages.
- ▶ **Breast Cancer Information Clearinghouse**
- ▶ **American Cancer Society**, in addition to providing detailed, reliable cancer information, hosts the Cancer Survivors Network. This provides a secure, anonymous place to share experiences and find support. To join the community, go to csn.cancer.org. For cancer information, go to the American Cancer Society website at www.cancer.org or call 800-227-2345.
- ▶ **Susan G. Komen Breast Cancer Foundation** is the world's leading nonprofit organization funding the fight against breast cancer. It provides information about breast cancer through its website and hosts the annual Susan G. Komen Race for the Cure. Call 800-I'M-AWARE (462-9273) or go to the website at www.komen.org.
- ▶ **National Breast Cancer Foundation, Inc.** is a nonprofit that sponsors the annual Pink Ribbon Challenge to raise awareness and fund free mammograms for women in need. It also hosts communities and discussion groups. See the website at www.nationalbreastcancer.org.



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