

# Breast Health Lecture

## 1. Healthy Breasts:

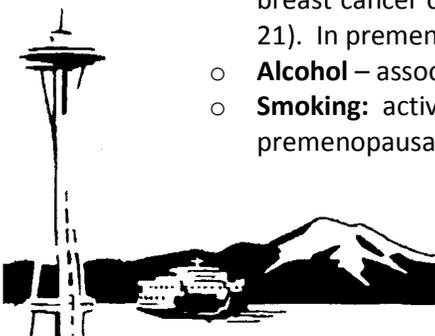
- **Physical Activity:** regular physical activity shows protective effect – more so in post menopausal women.
- **Sleep!** Dr. Molly thinks that breast cancer is more prevalent in post-menopausal women not only from hormone changes but from a decrease of sleep.
- **Stress** – do what you can to decrease your daily stress.
- **Calcium/Vitamin D**
- **Diet:** Eat a diet high in vegetables and lean proteins (chicken, fish, tofu, beans)
- **Do not smoke** and avoid second hand smoke
- **Limit alcohol intake**
- **Breastfeeding** for at least 12 months can decrease breast cancer risk
- **Weight:** Maintain a healthy weight. There is an increase of Breast Cancer rates in overweight menopausal women versus women with healthy weight.
- **Avoid chocolate and caffeine** – they prevent estrogen from being broken down – which can lead to fibrocystic breasts

## 2. Breast Cancer:

- Worldwide – breast cancer is the second most common type of cancer after lung cancer, and the fifth most common cause of cancer death
- In the United States – breast cancer is the most common female cancer, the 2<sup>nd</sup> most common cause of cancer death in women, and the main cause of death in women ages 40-59.

### Risk Factors:

- **Age/Gender:** Breast cancer occurs 100 times more frequently in women than in men. Incidence rises sharply with age until about 45 to 50 when the rise is less steep- probably due to decrease in hormones associated with menopause. 85% of cases occur after age 40.
- **Race:** In the US the highest occurrence of breast cancer is in Whites (124 cases per 100,000 women), versus 113/100,000 in Blacks, 82/100,000 in Asian Americans and Pacific Islanders, 90/100,000 in Hispanic and Latina women and 92/100,000 in Native Americas.
- **Hormonal Factors:** age of menarche, having children, menopause, breast feeding. Prolonged exposure to and higher concentrations of estrogen increases a women's risk of breast cancer.
- **Family History:** Only 10% of breast cancers are genetic
- **Personal history of breast cancer:** if a woman has breast cancer in one breast, the chance of getting breast cancer in the other breast increases 0.5 to 5% depending on the type of cancer.
- **Exposure to ionizing radiation:** Some examples include: Imaging X-rays and CT scans as well as radiation from cancer therapy
- **Lifestyle and dietary factors:**
  - **Weight-** In post menopausal women, higher weight as well as post menopausal weight gain has been associated with a higher risk of breast cancer. Estrogen is produced in adipose (fat) tissue. One study showed that women who weighted at least 176 lbs had a 25% higher risk of breast cancer compared to women weighing 132lbs or less. (BMI greater than 33 vs less than 21). In premenopausal women weight does not increase risk of breast cancer.
  - **Alcohol** – associated with increased risk of hormone receptor-positive breast cancer
  - **Smoking:** active and passive tobacco smoke increases breast cancer risk – particularly in premenopausal women



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- **Proliferative Breast lesions:** Multiple fibroadenomas, sclerosing adenosis (extra tissue develops in milk glands), intraductal papillomas (grow inside breast milk ducts and can cause nipple discharge) can increase risk of breast cancer by 1.3 to 10%.

**Statistics:** Lifetime probability of developing breast cancer is 1 in 6

**Incidence:**

- In the 1980's breast cancer rates rose steeply by 3.7% per year. This was most likely the result of increased discovery with the use of mammography screening. Incidence continued to rise from 1994 to 1999 and then decreased from 1999 to 2007 by 1.8% per year (probably due to decrease in use of hormone replacement therapy). Breast cancer deaths have continuously declined since 1975.

**Your risk of Breast Cancer:**

- **What is your risk? You can calculate your breast cancer risk online at: [www.cancer.gov/bcrisktool/](http://www.cancer.gov/bcrisktool/)**

**3. Benign Breast Disease: are not associated with an increased risk of breast cancer**

- **Fibrocystic Breasts:** fibrous cysts are fluid filled, round or ovoid masses that develop in the breast. They are affected by circulating hormone levels and can cause significant, localized pain when they enlarge. They are common in women of reproductive age. They are characteristically cyclic and bilateral, with multiple lumps of varying sizes, giving the breast a nodular texture.
  - **Treatment considerations to decrease Fibrocystic changes:**
    - Diets high in fiber and soy protein have shown a decrease in breast fibrocystic changes and tenderness
    - Evening primrose oil (3 grams daily) and other oils rich in gamma-linolenic acid such as flaxseed oil, black currant oil, and borage oil
    - Vitamin A
    - Iodine – topical or internal
    - Caffeinated beverages such as coffee, tea, cola, and chocolate contain methylxanthines that can stimulate cell production of fibrous tissue and cyst fluid
- **Solitary papilloma:** these present as single breast lumps. They consist of solitary cysts filled with proliferating duct cells. They are diagnosed by core needle biopsy and the recommendation is for them to be excised.
- **Simple fibroadenoma:** these are benign solid tumors containing glandular as well as fibrous tissue. They feel as well-defined, mobile masses upon palpation. They can occur on the same breast or bilateral. There is a high association with hormone levels, and are more common in women between ages 15 – 35 years.

**4. What do I do if I find a lump or change in my breast tissue?**

- **Contact your physician!**

- If you are post menopausal, your doctor may want to schedule an office visit to evaluate your breast tissue and order imaging.

- If you are pre or peri-menopausal, depending on what is going on, your doctor may want to wait until after your cycle to see if the lump/mass goes away.



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