

Is that a LUMP?

WHATEVER AGE YOU ARE,
REGULAR SCREENING AND
EARLY DETECTION IS YOUR
BEST DEFENCE AGAINST
BREAST CANCER.

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WHEN 48-YEAR-OLD FAN SHIH WAH was diagnosed with breast cancer in November 2010, she couldn't believe her ears. "The doctor broke the news to me and I broke down in front of him," says the mother of two. "I'd been going for mammograms every year since I turned 40... and I couldn't understand how this could happen to me."

The lump was discovered during Shih Wah's yearly mammogram at Yishun Polyclinic. Like many women, she had mistakenly thought that yearly mammograms would 'protect' her from developing breast cancer. Having regular mammograms may not prevent breast cancer, but they can detect cancer at an early stage. This was the main reason why Shih Wah's cancer was too small to be felt when it was diagnosed.

"The doctors told me I had ductal carcinoma-in-situ, DCIS, which was the earliest form of breast cancer. It was only 7mm – so small!" recalls Shih Wah, who works in the service industry.

Shih Wah can count herself fortunate — breast cancer is the most common cancer among women in Singapore. More than 1,400 women here are diagnosed with it each year and more than 300 die from it. Researchers from the National University of Singapore have also found that the incidence of breast cancer among Singapore women in their 50s is fast increasing.

The extent of the disease is described in stages. This takes into account the size of the tumour, whether it has invaded the lymph nodes under the armpit, and whether it has spread to other organs. There are four stages of breast cancer. Stage I and II cancers are considered early cancers and the success

(CANCER CONTROL)

rate of treatment is high. Stage III cancers are locally advanced cancers; they are still potentially curable but the chances of disease relapse is high. Stage IV cancers are metastatic cancers which have spread outside the breast to other organs like the liver, lungs and bones. Stage IV cancers are not curable.

Shih Wah's cancer — DCIS — is commonly described as Stage 0. It is, in essence, a very early form of cancer and has not acquired the ability to spread. But if untreated, it will progress and become a fully invasive (Stage I to IV) cancer.

According to Dr Tan Ern Yu, Consultant, Breast Service, Department of General Surgery, Tan Tock Seng Hospital (TTSH), there is a significant difference in survival rates between the early stages and advanced stages of breast cancer. Five-year survival rates for those with Stage I cancer is 95 per cent or more, while it is only 40 per cent for those with Stage III. In cancer, survival is often described as the proportion of people with that specific disease stage who are expected to be alive at the end of five years.

It does not mean, however, that no

one survives past five years. In reality, the large majority of women do survive beyond this period of time. The likelihood of the cancer returning depends largely on the stage at which it is discovered; the more

advanced the stage, the higher the chances of the cancer returning despite treatment. This is the reason for emphasising early detection and treatment.

In Singapore, the majority of breast cancer is diagnosed in the early stages, says Dr Tan. However, a significant number of Singaporean women continue to be diagnosed with Stage III and Stage IV breast

cancer — and this number is much higher in Singapore compared to developed western countries.

“**DOCTORS RECOMMEND THAT ALL WOMEN ABOVE THE AGE OF 20 PERFORM BREAST SELF-EXAMINATIONS ON A MONTHLY BASIS**”

Vigilance Pays

Performing monthly breast self-examinations and going for regular screening — like what Shih Wah did — are important if breast cancer is to be detected in the early stages. Doctors recommend that all women above the age of 20 perform breast self-examinations on a monthly basis. Those 40 years and older should start attending regular mammogram screenings.

One-stop For Breast Cancer Care

Officially opened on 4 June 2010, The Breast Clinic @ TTSH marks a major milestone in local efforts to provide comprehensive one-stop care to women with breast complaints. Previously, women would have to see up to three different specialists, at three different clinics, often on three different days. Now, patients are now able to have their mammograms and ultrasound

examinations done at the same place where they consult their breast specialist, and on the same day as well.

Every October, during the Breast Cancer Awareness Month, the clinic organises public forums. In the last two years, the breast surgeons teamed up with Chinese physicians from the Department of Complementary and Integrative Medicine to organise forums

focusing on how Chinese herbs can be used during cancer treatment. These forums were hugely popular. Because of this demand for reliable knowledge of Chinese herbs, the Breast Service and the Department of Complementary and Integrative Medicine are working with chefs from the Paradise Group to publish a cookbook of Chinese herbal recipes to nourish those undergoing cancer treatment. This book will be launched in October 2012.



“You should always get any newly-discovered breast lump assessed by a doctor, even if it is not painful,” says Dr Tan. “The large majority of breast cancers present as lumps which are not painful. It is not always possible to differentiate between a benign or malignant tumour through a clinical examination alone. So the doctor might then ask you to go for breast imaging and a biopsy.”

Early Does It

Shih Wah's early detection of a lump made her breast cancer easier to treat. She went for an operation a month after her diagnosis to remove the lump. Shih Wah also underwent radiotherapy five times a week for a month after the operation to kill any remaining cancer cells. “Radiotherapy



older women with early stage breast cancer who underwent radiotherapy after lumpectomy were much less likely to suffer a relapse and require mastectomy (surgical removal of the whole breast).

Supporting Roles

Breast cancer is a traumatic experience for any woman — and that’s why it helps when a patient’s loved ones come on board to lend support. “My children — a 22-year-old daughter and 17-year-old son — went online and researched my condition for me. My husband of 23 years, a taxi driver, shuttled me to and from my radiotherapy treatments and doctor visits whenever he could,” says Shih Wah.

In 2011, a study conducted by Vanderbilt-Ingram Cancer Center in the United States and the Shanghai Institute of Preventive Medicine in China found that women who have a strong social support system in the first year of being diagnosed are less likely to die or have a recurrence of cancer. This speaks of the greater psychological and emotional stress that a woman goes through after being diagnosed with breast cancer.

“Support from family members is vital to helping a woman cope with cancer,” says Dr Tan. “Apart from providing practical help like taking over domestic responsibilities, family members provide valuable support by lending a listening ear and openly discussing any concerns or issues the patient might have.” **lw**

LATEST TREATMENTS

Herceptin, one of the latest in targeted therapy for breast cancer, selectively targets cells that express excessive amount of the HER2 receptor protein. Tumours that express HER2 tend to be more aggressive than other types of breast cancer, and make up about 25 per cent of all such cancers. Herceptin is hugely effective. Dr Tan Ern Yu, Consultant, Breast Service, Department of General Surgery, TTSH, says the drug has been shown to reduce the risk of recurrence by 50 per cent in early stage breast cancer — by far the largest risk reduction ever seen with any new treatment.

Herceptin is well tolerated by most patients and has minimal side effects. “One of its main side effects is a depression of heart function, which is transient, and does not cause any symptoms,” says Dr Tan. Another targeted therapy drug for HER2-positive tumours is Tykerb. Studies are ongoing to define its role in breast cancer treatment. Researchers are also looking at developing a vaccine to target the HER2 protein.

is completely painless,” says Shih Wah. “Because of this, I didn’t experience many of the side effects that are commonly associated with other cancer treatments such as chemotherapy. There was no hair loss or nausea. I only experienced a loss of appetite.”

Radiotherapy and chemotherapy are just two of the many treatments for breast cancer. The need for these treatments depends on the tumour type and whether the cancer has spread to the lymph nodes. These can vary depending on factors such as the stage of the cancer and the type of cells in each individual tumour. There is strong evidence that radiotherapy prevents future disease relapse. A study published in the journal *Cancer* in August this year found that in the 10 years after initial treatment,

DO IT YOURSELF

Perform breast a self-examination (BSE) once a month, about two weeks after the start of your period. The Breast Cancer Foundation recommends these easy steps.

AT THE MIRROR

At each of the following positions:

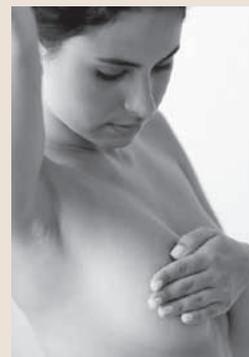
- Arms at your side
- Arms raised or behind your head
- Hands on hips and chest muscles tensed

Look out for:

- Any change in size or shape of breast
- Any dimpling of the skin
- Any change in

appearance of nipples

- Any discharge from nipples (by squeezing gently)



You can also do a BSE while in the shower or lying down. Visit the Breast Cancer Foundation at www.bcf.org.sg for more details and to find out more about breast cancer.