

Potential warning signs for breast cancer

Breast cancer is the most commonly occurring cancer in women across the globe. According to the World Cancer Research Fund International, there more than 2.26 million new cases of breast cancer in women in 2020. Such figures are sobering, but it's important to recognize that breast cancer survival rates have improved dramatically in recent decades, providing hope to the millions of women who may be diagnosed with the disease in the years to come.

Various factors have helped to improve breast cancer survival rates, and education about the disease is certainly among them. Women are their own greatest allies against breast cancer, and learning to spot its signs and symptoms is a great first step in the fight against this potentially deadly, yet treatable disease. *Knowing your body*

The American Cancer Society urges women to take note of how their breasts normally look and feel. That knowledge is vital because it helps women recognize when some-

thing does not look or feel good to the touch with their breasts. Screening alone may not be sufficient, as the ACS notes that mammograms do not find every breast cancer. Signs and symptoms

When women are well acquainted with how their breasts look and feel, they're in better position to recognize any abnormalities, which may or may not be indicative of breast cancer. The ACS reports that the following are some potential warning signs of breast cancer.

- A new lump or mass: The ACS indicates that this is the most common symptom of breast cancer. A lump or mass that is cancerous is often painless, but hard and has irregular edges. However, lumps caused by breast cancer also can be soft, round and tender. Some even cause pain.
- Swelling: Some women experience swelling of all or part of a breast even if they don't detect a lump.
- Dimpling: The skin on the breast may dimple. When this occurs, the



skin on the breast sometimes mimics the look of an orange peel.

- Pain: Pain on the breast or nipple could indicate breast cancer.
- Retraction: Some women with breast cancer experience retraction, which occurs when the nipple turns inward.
- Skin abnormalities: Breast cancer may cause the skin on the breast to redden, dry out, flake, or thicken.
- Swollen lymph nodes: Some women with breast cancer experience swelling of the lymph nodes

under the arm or near the collarbone.

The presence of any of these symptoms merits a trip to the doctor. Women with these symptoms should not immediately assume they have breast cancer, as the ACS notes that various symptoms of breast cancer also are indicative of non-cancerous conditions that affect the breasts. Only a physician can diagnose breast cancer, which underscores the importance of reporting symptoms to a doctor immediately.





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How ethnicity affects breast cancer risk

No one is immune to breast cancer. Even men can be diagnosed with breast cancer, though the threat of the disease looms much larger for women. In fact, the World Cancer Research Fund International reports that breast cancer is the most commonly occurring cancer in women across the globe. However, the World Health Organization indicates that, as of the end of 2020, roughly 7.8 million women who had been diagnosed with breast cancer in the previous five years were alive. So while no woman wants to receive a breast cancer diagnosis, millions of women worldwide are living testaments to the effectivenesss of treatments for the disease.

There are various things women can do to increase their chances of surviving a breast cancer diagnosis. Recognizing one's own risk of developing the disease is especially important, as it may compel women to prioritize screening and make changes that could reduce their cancer risk.

There are many risk factors for breast cancer, and ethnicity is one of them. Data from the National Cancer **Institute and the American Cancer** Society indicates that breast cancer rates and survival rates differ among ethnic groups. Though the relationship between ethnicity and breast cancer is complicated and intertwined with other risk factors, data from the NCI and ACS indicates that incidence and death rates are higher among certain ethnic groups than others.

- Highest incidence rate: White, non-Hispanic
- Lowest incidence rate: Korean
- Highest death rate: African American

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Family history increases risk for breast cancer

Millions of people across the globe will be diagnosed with breast cancer this year. In fact, only certain skin cancers affect more women than breast cancer within the United States and Canada.

The World Cancer Research Fund International says breast cancer is the most commonly diagnosed cancer in women across the globe. Belgium, The Netherlands and Luxembourg had the highest number of breast cancer cases in 2020, while Barbados and Fiji had the greatest number of deaths attributed to the disease. Some of these high case numbers may be attributed to women with family histories of breast cancer — something that increases risk significantly.

BreastCancer.org indicates that women with close relatives who have had breast cancer, such as sisters, mothers or grandmothers, are at considerably higher risk of developing breast cancer themselves. Also, breast cancer may occur at a younger age in women with family histories of the disease.

Understanding breast cancer risk is vital for women's health. The following breakdown, courtesy of the Centers for Disease Control and Prevention, can help women from all backgrounds understand their risk for breast cancer.

 Average risk: No first- or second-degree relatives with breast or ovarian cancer, or one seconddegree female relative with breast cancer (in one breast only) diagnosed after age 50.

• Moderate risk: This is a somewhat higher risk that may not turn into breast cancer. It occurs when there is one or two first-degree or two second-degree female relatives with breast cancer (in one breast only), with both relatives diagnosed after age 50; otherwise, one or two first- or second-degree relatives with high grade prostate cancer.

• Strong: Women with strong

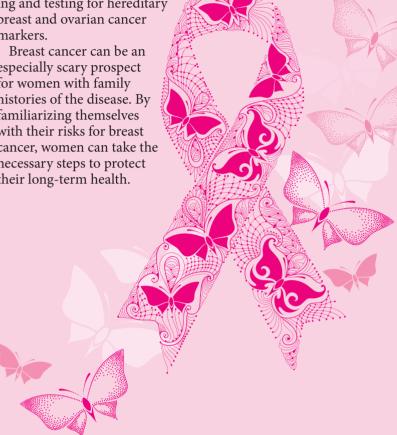
risks have much higher chances of developing breast cancer than the general population. Conditions like having one or more first- or second-degree relatives with breast cancer diagnosed at age 45 or younger, triple negative breast cancer, primary cancer of both breasts, and both breast and ovarian cancer in the same relative are warning signs of increased risk.

It's important for women with increased risk for breast cancer due to family history to discuss options with their doctors. More frequent mammograms and other screening tests may be recommended, and screening at younger ages than the standard age also may be considered. Women who are at high risk may be urged to undergo genetic counseling and testing for hereditary breast and ovarian cancer markers.

Breast cancer can be an especially scary prospect for women with family histories of the disease. By familiarizing themselves with their risks for breast cancer, women can take the necessary steps to protect their long-term health.



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7 ways to reduce breast cancer risk

Many women are concerned about the potential for developing breast cancer in their lifetimes. Breast cancer is the second-most common cancer among women in the United States and Canada. Despite that prevalence, there are ways for women to reduce their risk for breast cancer.

While it is impossible to change family history or genetic markers like gene mutations that increase breast cancer risk, the following are seven ways women can lower their risk.

1. Exercise regularly and maintain a healthy weight. Physical activity and monitoring calories can keep weight in check. The Mayo Clinic recommends at least 150 minutes per week of moderate aerobic activity or 75 minutes per week of vigorous aerobic activity. Strength training at least twice a week also is recommended. Being overweight or obese increases a woman's risk for breast cancer.

2. Consume a healthy diet. The link between diet and breast cancer risk is still being studied. However, research suggests that a diet high in vegetables and fruit, and calcium-rich dairy products, but low in red and processed meats may lower breast cancer risk.

3. Avoid or limit alcohol consumptions. Alcohol increases risk of breast cancer, even in small amounts. For those who drink, no more than one alcoholic drink a day should be the

limit. The more a woman drinks, the greater her risk of developing breast cancer, states the Mayo Clinic.

4. Undergo genetic counseling and testing. Women concerned about a genetic connection or family history of breast cancer can speak to their doctor about testing and counseling that could help them reduce their risk. Preventive medicines and surgeries might help those at elevated risk for breast cancer.

5. Limit hormone therapy. Combination hormone replacement therapy for post-menopausal women may increase risk of breast cancer, indicates the Centers for Disease Control and Prevention. Similarly, taking oral contraceptives during reproductive years may increase risk. Women can speak with their physicians to weigh the pros and cons of taking such hormones.

6. Breastfeed children, if possible. Breastfeeding has been linked to reducing a woman's risk of developing breast cancer.

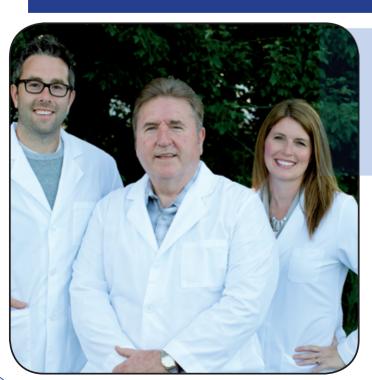
7. Learn to detect breast cancer. Women should get to know their bodies so they can determine if something is awry as early as possible. Early detection of breast cancer increases the chances that treatment will prove successful.

Women can embrace various strategies to reduce their risk of developing breast cancer.

Did you know?

According to the American Cancer Society, breast cancer mainly occurs in middle-aged or older women. In fact, the median age at the time of a breast cancer diagnosis is 62. Though it's possible for women far younger than 62 to be diagnosed with breast cancer, the ACS reports that only a very small number of women younger than 45 are diagnosed with the disease each year. Despite the average age of onset being over 60, breast cancer is highly treatable. The World Health Organization notes that breast cancer treatments routinely achieve survival probabilities of 90 percent or higher. However, those probabilities decline considerably in lower-income countries where access to screening and other medical services is limited. For example, the WHO notes that five-year survival rates for breast cancer routinely surpass 90 percent in high-income countries like the United States and Canada. However, those rates are as low as 40 percent in South Africa, where early detection of the disease is less likely than it is in wealthier nations. That disparity in survival rates underscores the need for greater resource allocation in lower-income countries, but also highlights the effectiveness of screening and other measures in high-income countries where women are taught to report any abnormalities with their breasts.

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How to support loved ones who have breast cancer

Efforts to educate women about breast cancer have helped raise awareness of the disease and just how treatable it is when detected early. Despite that, a diagnosis can still be difficult for women and their families. When someone close to you is affected by breast cancer, priorities suddenly change and you may be wondering what you can do to provide the support needed to help this person navigate any ups and downs that could be on the horizon.

A breast cancer diagnosis does not produce a uniform response. While one loved one may embrace others wanting to help, another may feel she is a burden and exhibit an unwillingness to accept help. In the latter instance, being a supportive bystander may require walking on eggshells. Even still, there are some universal ways to lend support when a friend or a loved one has been diagnosed with cancer.

• Offer practical support. Cancer affects the body in a number of ways. Energy levels may wane and certain symptoms may arise. Side effects from treatments also can make it difficult to continue with daily tasks. So an offer to help with tasks associated with daily living, such as cooking meals, gardening, washing clothes, or cleaning up around the house, can be practical and much appreciated. Approach the individual and ask questions in pointed ways. Rather than, "What can I do to help?", which may result in an answer of, "Nothing," figure out a way to pitch in and then ask if that would be acceptable. This may be, "Would you like me to run to the supermarket for you today?"

• Offer emotional support. Someone with breast cancer may just need a person who can be there and listen. A hug, a nod of understanding or even a companion who can chat and take the person's mind off the cancer can be immensely helpful. Keep in



mind that emotions may change on a dime, and some emotions may be directed at support systems. While it can feel hurtful, remember the real reason for any outburst is the disease. Patience is needed at all times.

• Learn what you can about breast cancer. Research the type of cancer your loved one has, which may make it easier to understand what to expect. If the person is amenable, you may consider accompanying her to appointments to hear firsthand about the next steps in her treatment and recovery.

• Maintain a positive attitude. It's never easy knowing someone you love is sick. They are going through their own emotional roller coaster, and support systems can lift their spirits by maintaining positive attitudes. Avoid wearing rose-colored glasses, but try to remain as upbeat as possible.

• Find a support group. Professional support groups are great resources for coping with a cancer journey. Supporting a person with cancer takes its own unique toll, particularly when caring for a spouse, child or mother with breast cancer. Support groups for support networks can be helpful.

Individuals diagnosed with breast cancer may need a little extra love and support. It's up to caregivers and friends to step up and provide what is needed.

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Movember shines a light on various men's health issues

Started in Melbourne, Australia, by two friends nearly 20 years ago, Movember® has become a global, mustachioed phenomenon that has since helped to fund more than 1,250 men's health projects.

Each November, men across the globe agree to grow a moustache in an effort to raise awareness about men's health issues. Dubbed Movember®, this annual effort is the brainchild of two friends, Travis Garone and Luke Slattery, who had been joking about how to bring moustaches back into fashion. The two men were inspired to tie their efforts into a campaign to raise awareness about men's health by the mother of a friend who, at the time, was raising funds for breast cancer.

Since its inception, Movember® has helped raise awareness about three particular issues, prostate cancer, testicular cancer and men's suicide, that might otherwise have garnered considerably less attention. Taking time to understand these issues can help make Movember® an even greater success than it already is. **Prostate cancer**

The World Cancer Research Fund International reports that prostate cancer is the second most commonly occurring cancer in men and the fourth most common cancer overall. In fact, more than 1.4 million men across the globe are diagnosed with

prostate cancer each year. Education about prostate cancer can include an emphasis on the factors and behaviors that increase a man's risk for the disease, which the WCRFI indicates include height (being tall increases a man's risk) and weight (being overweight and obese also increases risk). Testicular cancer

The American Cancer Society reports that the average age at the time of diagnosis of testicular cancer is about 33, which underscores the notion that no man is too young to learn about men's health issues. Though testicular cancer is not as prevalent as prostate cancer, the American Society of Clinical Oncology notes that diagnoses of the disease have been on the rise for decades. The reasons for that are unknown, but lack of awareness of the disease and what can be done to

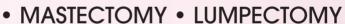
SEE PAGE B5



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When women should be screened for various conditions and diseases

Preventive care is a key component of an effective health care regimen. Preventive care is not a one-size-fitsall approach, as various factors will influence what an individual should be doing at any given moment to ensure his or her overall health. Age, medical history and family history are three factors that could influence a preventive care regimen. Gender is another variable that affects preventive care, and women should know that screening guidelines for various conditions and diseases could be different for them than they are for men. Women's personal medical histories could affect how often they should be screened for various conditions, but these screening recommendations from the United States Preventive Services Task Force can serve as a guideline for women.

• Blood pressure: Blood pressure should be checked at least once every two years if women are considered to be in a healthy range (under 120/80) or annually if they are above normal (between 120/80 and 139/89).

• Bone density: Women should get a bone density test at least once upon turning 65. Women younger than 65 can speak with their physicians if they want the test.

• Breast cancer: The USPSTF recommends women between the ages of 50 and 74 schedule a mammogram every two years. Women 75 and older can discuss if the test is still necessary after age 74.

• Cervical cancer: Women between the ages of 21 and 65 who have a cervix should receive a Pap test every three years. Upon turning 30, a Pap test and an HPV test every five years is an option. Women over 65 can discuss if they need to continue receiving a Pap test with their physicians.

• Colorectal cancer: Screening for colorectal cancer is recommended for women between the ages of 50 and 75. Women can discuss which test to get with their physicians, who also can inform them what to do after turning 75.

• Diabetes: Women whose blood pressure is higher than 135/80 should

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be tested for diabetes. Women who take medication for high blood pressure also should be tested.

• HIV/AIDS: Women should be tested for HIV/AIDS at least once after age 20 or earlier if they are high risk for HIV.

• **Lipid profile:** The USPSTF recommends a routine lipid profile starting at age 20 for women who are at increased risk for heart disease.

• Lung cancer: Women with a history of smoking should receive annual testing with low-dose computed tomography between ages 55 and 80.

This includes women who have quit smoking within the last 15 years.

• **STDs:** Women who are sexually active or pregnant should be tested annually for chlamydia through age 24. Annual tests for chlamydia, gonorrhea and syphilis should continue after age 25 for women who are at increased risk for an STD. Women can discuss the risk factors with their physicians.

MOVEMBER From Page B4

detect it early could be contributors to the increase.

Men's suicide

The American Foundation for Suicide Prevention reports that suicide is the 12th leading cause of death in the United States. The rate of suicide is highest among middleaged white men, and in 2020 men died by suicide at a rate nearly four

times higher than women. Globally, the Institute for Health Metrics and Evaluation reports that suicide rates in men are just over twice as high as those for women. A greater awareness of suicide, including how much more prevalent it is among men than women, could help prevent more suicides. More information about suicide prevention is available at

afsp.org.

What started as a playful way to restore moustaches to their once-lofty status has become a highly successful campaign that has helped to raise awareness about three significant men's health issues. More information about Movember® can be found at us.movember.com.



BREAST CANCER RISK From Page B2

• Lowest death rate: Chinese American

The MD Anderson Cancer Center notes that socioeconomic factors such as education and income level and access to medical screening and services undoubtedly affect incidence and death rates among different ethnicities. But other factors, such as cultural practices and beliefs within certain ethnic groups, also affect those rates. Women concerned about breast cancer are urged to prioritize screening for the disease and discuss factors such as diet, physical activity and cultural practices to determine if there's anything they can do to lower their cancer risk.

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