

# Think PINK

October 2017

A Special Supplement to

the  
Oneida Daily Dispatch

## Care Comes First

How to choose  
the right cancer  
care specialist  
for you

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## Birth and Breast Cancer

Pregnancy is possible  
after breast cancer

## Returning to Form

Regrow healthy hair  
after chemotherapy



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# Think PINK

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## Did you know?

While certain breast cancer risk factors, including gender and age, are beyond women's control, the American Cancer Society notes that certain factors are related to personal behaviors. Alcohol consumption is one such lifestyle-related risk factor for breast cancer. Compared with nondrinkers, women who consume between two and five alcoholic drinks per day have about a 1.5 times greater risk of developing breast cancer than women who abstain from alcohol. A woman's risk of developing breast cancer increases only slightly compared to nondrinkers if she has just one alcoholic beverage per day. Weight is another breast cancer risk factor that women can control. Women who are overweight or obese have a greater risk of developing breast cancer than those who are not. Prior to menopause, women's ovaries make most of their estrogen, with fat tissue making just a small amount. But women's ovaries stop making estrogen when they enter menopause, at which time fat tissue produces most of their estrogen. Having excessive fat tissue can increase estrogen levels and raise a woman's risk for breast cancer. If or when a woman decides to have children can also affect her risk for breast cancer. According to the ACS, women who have not had children or who had their first child after turning 30 have a slightly higher risk of being diagnosed with breast cancer than women who had many pregnancies and became pregnant at an early age.



# BREAST IMPLANTS CARRY

## VERY LOW RISK OF CAUSING CANCER

**C**osmetic surgery to address anything from wrinkles to abdominal fat has become more acceptable in recent decades. The American Society of Plastic Surgeons says that, since 2000, overall procedures have risen by 115 percent.

Although procedures like lower body lifts and nose reshaping remain popular, breast augmentation was the most common of the 1.7 million cosmetic surgical procedures performed in 2015. Breast augmentation includes lifts, reconstruction and implants. The safety of breast implants is continually scrutinized, particularly with regard to the potential correlation between implants and cancer risk. The U.S. Food and Drug Administration recently updated its understanding and warnings concerning cancer linked to breast implants. Nine deaths and 359 cases have been reported to the FDA that involved a unique cancer that is associated with breast implants. Extremely rare anaplastic large cell lymphoma, or ALCL, affects cells in the immune system and can be found around the breast implant. It is important to note that ALCL is not a form of breast cancer, but a separate

strain of cancer that can be found in the skin or lymph nodes. Women who have had problems with the implant, such as lumps or asymmetry, are at a higher risk for the condition than women who haven't had problems. However, ALCL is estimated to occur in only one of every 300,000 women with implants.

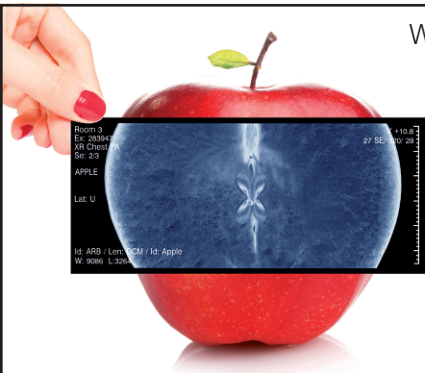
Breast implants remain a generally safe option for those seeking augmentation or reconstruction. Many of the risks associated with the implants will occur soon after surgery, if at all. These may include settling and malpositioning. Leaking and capsular contracture, or when a layer of scar tissue develops around the implant, can occur in the first several years.

The FDA suggests that women carefully consider the pros and cons to implants before deciding to go under the knife. In many cases, additional procedures or replacement in the future may be necessary. According to the FDA's Center for Devices and Radiological Health, while a few women may keep their original implants for 20 years or more, that is not a common outcome. More information about breast implants and ACLC are available at [www.fda.gov](http://www.fda.gov).

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# CHOOSE THE RIGHT CANCER CARE SPECIALIST FOR YOU

Cancer is a word no one wants to hear. Unfortunately, according to BreastCancer.org, around one in eight women in the United States will be diagnosed with breast cancer this year, while the Canadian Breast Cancer Foundation notes that one in nine Canadian women will receive the same news.

A cancer diagnosis is more manageable when patients have knowledgeable and supportive medical teams on their side. Taking an active role in one's care can help cancer patients feel more in control. One of the most important steps a person can take

after receiving a cancer diagnosis is to find an oncologist who offers the ideal blend of skills and support.

A doctor who diagnoses cancer is not necessarily the one who will guide patients through their treatments. Typically, general practitioners will refer patients to an oncologist, who specializes in treating individuals with cancer. Oncologists can be found in many different settings. Some practice in university hospitals, community medical centers or private practices. Oncologists stay up-to-date on all of the latest research and treatment options

concerning cancer, which should help calm patients' concerns about working with a new doctor. Finding the right oncologist after receiving a cancer diagnosis requires patience. The following are some tips for cancer patients and their families as they begin searching for an oncologist.

Speak with a trusted doctor. A family doctor may be able to recommend an oncologist. The American Cancer Society advises newly diagnosed cancer patients ask their doctors, "If you were in my place, which doctor would you see first?"

Research cancer specialties. The American Society of Clinical Oncology advises cancer patients to select a doctor who specializes in their type of cancer. Find out if the doctor received any advanced training, and make certain he or she is board certified in oncology.

Choose a convenient location. The location of the doctor's

office as well as the oncologist's hospital affiliation may play a role in the decision. While some people will travel all over for the best care, being closer to home may be a priority for others.

Confirm care will be covered. When a list of preferential oncologists has been made, patients must confirm that doctors will accept their insurance coverage to avoid potentially hefty out-of-pocket costs.

Learn about different services. Some oncologists work with an extensive group of people who offer well-rounded care. These can include nutritionists, physical therapists, social workers, and specialty registered nurses. If this is a priority to you, locate an oncologist with such a team under one roof. Once cancer patients choose an oncologist who meets their particular needs, the road to getting well can be that much easier to navigate.

**LET'S GROW AWARENESS TO SAVE LIVES**



# CURTAIL COCKTAILS

## TO REDUCE BREAST CANCER RISK?

**M**ixed messages exist regarding the health benefits and implications of frequent, yet controlled alcohol consumption. While some studies suggest a drink or two a day promotes long-term health, other data indicates that even sipping an average of 10 grams of alcohol per day can increase a person's risk of cancer. According to Anne McTiernan, a cancer prevention researcher at Seattle's Fred Hutchinson Cancer Research Center, the equivalent of a small glass of wine, an eight-ounce beer or one ounce of hard liquor is associated with a 5 percent increased risk of breast cancer in premenopausal women and a 9 percent increase in postmenopausal women. Other data paints a similar picture. Compared to women who don't drink at all, women who have three alcoholic drinks per week have a 15 percent greater risk of breast cancer. Experts estimate that the risk of breast cancer goes up another 10 percent for each additional drink women regularly have each day. And younger women also are at risk. Teen and tween girls who drink between three and five alcoholic beverages a week increase their risk of developing benign breast lumps. The cancer information and research organization BreastCancer.org notes that research consistently indicates that drinking alcoholic

beverages increases a woman's risk of hormone-receptor-positive breast cancer. This is because alcohol can impact levels of estrogen and other hormones associated with this particular type of breast cancer. Furthermore, alcohol may damage DNA in cells, resulting in increased breast cancer risk. Drinking alcohol does not mean women or men are destined to be diagnosed with breast cancer. Alcohol is just one of many variables that can increase a person's risk of getting the disease.

While curbing excessive drinking is good for health in general, curtailing cocktail consumption may help to slightly reduce breast cancer risk in particular. However, women can take many other steps to reduce their risk for breast cancer.

Diet and exercise can benefit overall health in various ways, including reducing a person's risk for breast cancer. Various reports suggest that vigorous exercise, like cycling or running, can reduce a woman's risk of post-menopausal breast cancer by nearly 10 percent compared to less active women. Choosing healthy foods can keep weight in check, helping to reduce the risk of breast cancer.

The Mayo Clinic also lists these steps to help with breast cancer risk:

*avoid smoking,*

*breastfeed children*

*limit the dose and duration of hormone therapy for menopausal symptoms,*

*avoid exposure to radiation,*

*adhere to a Mediterranean diet that features legumes and other plant-based foods, and*

*prioritize breast cancer detection.*

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# HOW WOMEN CAN MAKE MAMMOGRAMS MORE COMFORTABLE

**M**ammograms help to detect breast cancer early, improving women's prognosis as a result. Susan G. Komen states that mammography is the most effective breast cancer screening tool in use today.

When women should begin getting mammograms remains open to debate. The American Cancer Society now recommends that women between the ages of 45 and 54 receive annual mammograms. Despite the benefits of

mammograms, many women avoid them out of fear of the pain and discomfort associated with the procedure. But researchers are examining how much pressure mammogram machines need to apply to get accurate breast images.

Until widespread customized mammograms are offered, women can take various steps to reduce the amount of discomfort they feel while undergoing these important screening procedures.

**APPLY A TOPICAL NUMBING GEL.** BreastCancer.org says a study found that applying a numbing gel an hour before having a mammogram resulted in less discomfort when compared to placebo and other pain-reduction techniques. Be sure to discuss application of the gel with your physician prior to your procedure.

## SCHEDULE YOUR PROCEDURE FOR THE RIGHT TIME.

Do not schedule a mammogram right before or during a menstrual cycle, when breasts already are very tender due to hormonal changes. Waiting until seven to 14 days after a period is a better bet.

## TAKE PAIN RELIEF PILLS.

A physician may suggest taking ibuprofen or acetaminophen prior to the appointment to reduce discomfort before and after the procedure.

**SPEAK WITH THE TECHNICIAN.** Women can express their concerns about pain to the mammogram technician, who might suggest various ways to minimize discomfort.

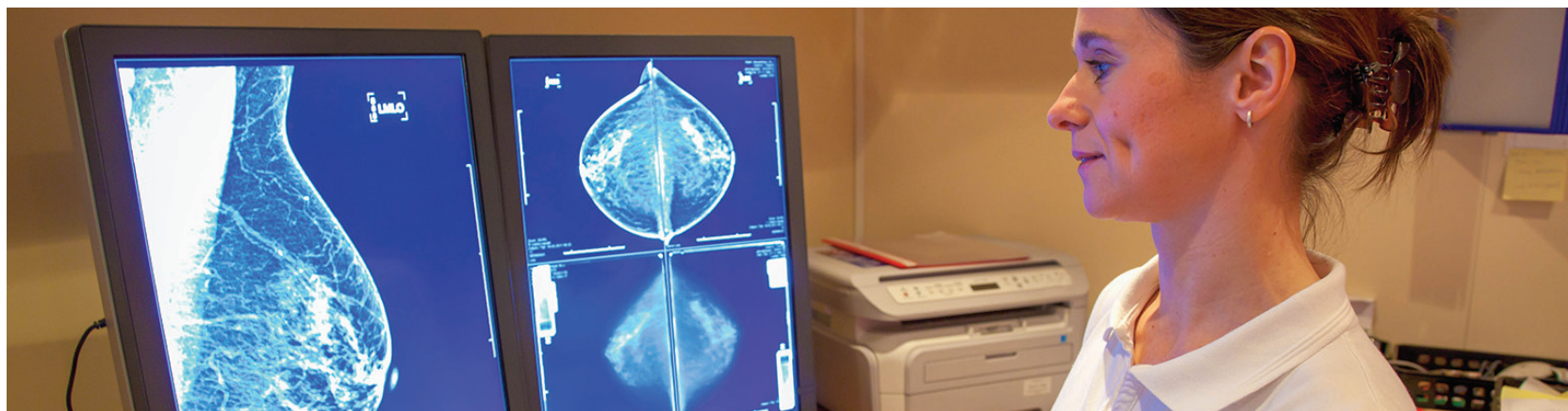
## LEARN ABOUT PADDING.

Find an imaging center that uses padding on mammogram plates. MammoPad is a soft, white, single-use foam pad that is invisible to X-rays.

## AVOID CAFFEINE.

Some women find that caffeine contributes to breast tenderness. Avoid caffeine the week before the procedure.

Mammograms are an important health care tool. Reducing discomfort may encourage women to follow guidelines regarding mammograms more closely.



# INFLAMMATORY BREAST CANCER

**M**any women know that a lump, pain or some other abnormality in the breast may be indicative of breast cancer. But a rash, redness or swelling may also be linked to a rare form of breast cancer known as inflammatory breast cancer. Inflammatory breast cancer, or IBC, accounts for roughly 1 to 5 percent of all breast cancers in the United States. The symptoms of IBC can differ

from symptoms of other forms of breast cancer, and a rash-like appearance may be part of it, according to Healthline. The National Breast Cancer Foundation, Inc., says IBC is a fast-growing breast cancer that infiltrates the skin and lymph vessels of the breast. When IBC is present, no distinct tumor or lump can be felt and isolated in the breast. Instead, earlier symptoms include the appearance of a rash or small

irritation that may be mistaken for an insect bite. Over time, the irritation can become more red, swollen and warm. Other changes to the breast skin may occur, including nipple inversion or flattening, a pitted appearance to the skin or dimpling. This dimpling is caused by a buildup of fluid in the breast that's due to cancer cells blocking the lymph vessels. This prevents the fluid from draining normally.

IBC is a very fast-moving cancer. By the time symptoms are discovered, IBC may already have advanced to Stage 3, necessitating aggressive treatment. This usually includes a combination of surgery, radiation, chemotherapy, and hormone treatments. Breast cancer comes in many different forms and can present in various ways. Never overlook any abnormality on or around the breast.



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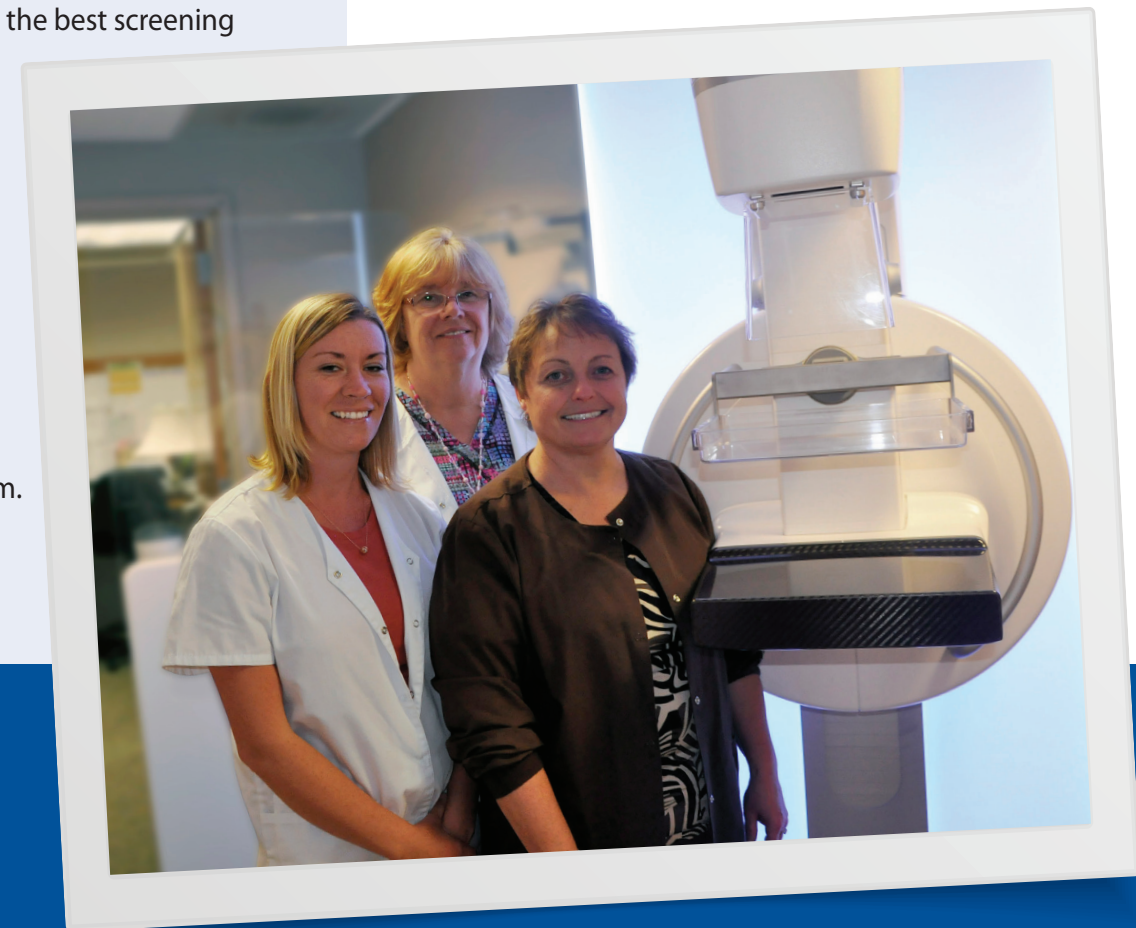
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# THE ROLE OF EXERCISE IN

# CANCER REDUCTION



Cancer can strike without warning. Although there is no way to prevent cancer, there are certain measures people can take to help reduce their risk, and exercise is one of the more effective ways to do just that. The National Cancer Institute notes that there is substantial evidence to support the idea that higher levels of physical activity are linked to lower risks

of several cancers, including colon cancer, endometrial cancer and breast cancer. In addition, a study published in the journal JAMA Internal Medicine found that leisure-time physical activity was associated with a significantly decreased risk of not only these three cancers, but also esophageal cancer, liver cancer, stomach cancer, kidney cancer, and myeloid leukemia, among others.

As many as one-third of cancer-related deaths can be linked to obesity and sedentary lifestyles, so it's easy to see the relationship between exercise and a reduced cancer risk. One of the more important ways that exercise may lower cancer risk is through the reduction of estrogen and insulin levels in the body. Women with high estrogen levels in their blood have increased risk for breast cancer. Although estrogen is a reproductive hormone, it is also contained in fat cells. Exercise can help burn fat and lower the amount of blood estrogen in the body, thereby lowering a woman's risk of developing breast cancer. Exercise also can decrease the potentially harmful effects of obesity, which are linked to the development of insulin resistance. According to the study, "The Links Between Insulin Resistance, Diabetes, and Cancer" by Etan Orgel, MD, MS, and Steven D. Mittelman,

MD, PhD, although the precise mechanisms and pathways are uncertain, it is becoming clear that hyperinsulinemia (insulin resistance), and possibly sustained hyperglycemia, are important regulators of not only the development of cancer but also of treatment outcome. Insulin resistance has been linked to the development of tumors in cases of breast and colon cancers. The NCI states that exercise also can reduce cancer risk by:

- reducing inflammation,*
- altering the metabolism of bile acids in the gastrointestinal tract, helping to decrease exposure of the body to suspected carcinogens,*
- improving immune system function, and boosting mood and feelings of well-being.*





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# PREGNANCY POSSIBLE AFTER BREAST CANCER

Having a child and breastfeeding are possible even after undergoing breast cancer treatment.

**M**ore women are diagnosed with breast cancer than any other cancer. For many women, one of the more frightening aspects of a breast cancer diagnosis is the potential impact the disease can have on an area of the body often associated with femininity and motherhood. Cancer.net indicates the five-year survival rate for breast cancer if the cancer is only in one breast is 95 percent. That rate dips to 85 percent if the cancer has spread to the lymph nodes. Even though this is great news, women may worry about the long-term implications of post-cancer life, particularly how they relate to future pregnancy plans. Early detection and improvements in treatment have markedly decreased the numbers of breast cancer-related fatalities. However, the therapies used to treat breast cancer can affect fertility and a woman's ability to have a successful pregnancy. While pregnancy after cancer treatment is often safe for both the baby and mother, women should still educate themselves about the potential effects of breast cancer treatment with regard to pregnancy.

## INFERTILITY RISKS AND PRESERVING FERTILITY

One of the main concerns women have after surviving a breast cancer diagnosis is the risk of infertility. Susan G. Komen says both chemotherapy and hormone therapy can impact fertility and decrease the window of time a woman has to have children. This is a particular concern for young women who have been diagnosed with breast cancer. Chemotherapy can damage the ovaries, while tamoxifen, a commonly used

hormone therapy, can cause irregular periods or stop the menstrual cycle altogether. Both of these treatments also may bring on natural menopause earlier than usual, according to the International Breast Cancer Study Group. Young women can opt to have their unfertilized eggs or embryos frozen and stored prior to starting cancer treatment. It's important to meet with a fertility specialist early on to discuss options.

## WAITING GAME

According to the American Cancer Society, some doctors advise breast cancer survivors to wait at least two years after finishing treatment before they try to get pregnant. No research yet indicates that getting pregnant will make women more susceptible to the cancer coming back, nor will pregnancy increase the risks of birth defects or other long-term health concerns in children born to women who have had breast cancer.

## BREASTFEEDING AFTER CANCER

Depending on the type of breast cancer treatment they receive, many women are still able to breastfeed. However, if radiation or surgery has affected breast health, milk production may be affected and the baby may have difficulty latching on. Using a breast pump to express milk may be an option. However, commercially produced infant formulas also can provide the nutrition growing babies need. Choosing to have children after breast cancer is a personal decision. Thanks to medical advancements, the possibility to conceive and raise a family is strong.





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## POST-BREAST **CANCER**

## EXERCISE **POINTERS**



**S**urgery is often part of treating breast cancer. According to the American Cancer Society, doctors may recommend women undergo breast biopsies, lymph node biopsies or removals, lumpectomies, mastectomies, or breast reconstructions as part of their treatments.

Surgery is often an effective way to treat breast cancer, but it does come with some side effects. The ACS notes that breast cancer surgery can affect how well women move their shoulders and arms, as pain and stiffness can weaken both areas. In addition, women's ability to take deep breaths may be compromised after surgery, and they may have difficulty performing normal everyday activities like dressing, bathing and brushing their hair. Exercise may seem impossible after breast cancer surgery, but the ACS recommends women exercise after surgery to get their arms and shoulders moving again. The ACS notes that exercise can be especially important to women who underwent radiation therapy after surgery, as radiation can affect movement in the arm and shoulder long after treatment has ended. Regular exercise after radiation treatment can help women maintain mobility in their arms and shoulders.

Exercising after breast cancer surgery can restore movement, but it's important that women take into account the following pointers, courtesy of the ACS, before beginning a regimen.

### **SPEAK WITH YOUR PHYSICIAN.**

Discuss exercise with your physician after undergoing surgery. Doctors may prescribe physical or occupational therapy, and some may even refer patients to cancer exercise specialists. Simply jumping back into your pre-surgery exercise routine can be dangerous, so bring up exercise immediately after surgery or during a followup visit.

### **EXPECT SOME TIGHTNESS.**

Doctors may suggest women begin exercising a week or more after undergoing breast cancer surgery. It's normal to feel some tightness in the chest and armpit after surgery, but the tightness will begin to subside as you exercise. Report any persistent tightness or pain to a physician immediately.

### **SOME BURNING, TINGLING,**

numbness, or soreness may also occur. These symptoms may be felt on the back of the arm and/or on the chest wall and are often a result of the surgery irritating some of your nerves. The sensations of burning, tingling, numbness, and soreness may even increase a few weeks after surgery. But the ACS advises women to keep exercising through these symptoms unless they notice unusual swelling or tenderness, which should be reported to physicians right away.

### **EXERCISE AFTER A WARM SHOWER.**

A warm shower may warm and relax muscles, making exercise less painful.

### **DRESS APPROPRIATELY.**

Comfortable, loose fitting clothing can make it easier to do exercises, as such attire is not restrictive.

More information regarding exercise after breast cancer surgery, including specific exercise recommendations, can be found at **www.cancer.org**.

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# BRA FITTING

## AFTER MASTECTOMY OR RECONSTRUCTION



**B**ra manufacturers insist that millions of women wear the wrong size bras. According to an international survey of 10,000 women from Swiss lingerie company Triumph, 64 percent of women are wearing the wrong size bra. Other studies suggest that figure is closer to 80 percent. While it can be challenging for women with healthy breasts to get the right fit, a well-fitting

bra is essential, especially for those who have undergone mastectomy or reconstruction after breast cancer. Post-mastectomy and lumpectomy procedures vary. Some women opt for a prosthesis, which is essentially a breast form (silicone, foam or fiber-fill) that is placed inside of a bra or attached to the chest wall. Other women choose to undergo surgical reconstruction

that will involve the insertion of an implant. Depending on the procedure they undergo, women may need to purchase special bras called "mastectomy bras." John Hopkins Medicine advises that mastectomy boutiques and specialty shops carry a variety of prosthetics and garments. Such shops also may employ certified fitters who are skilled at fitting women who have undergone treatment for breast cancer. Women should know that their bodies may change after undergoing a mastectomy. It may be necessary to get sized after surgery and frequently thereafter to accommodate for weight loss/gain and other changes as one ages. The Pink Bra, a mastectomy bra specialty retailer, advises every woman should have her bra and breast form fitting checked at least once per year to allow for changes in weight or body shape that may occur as a result of post-surgery treatment. Certain bra styles may feel and

look better to women than others, depending on the type of surgery and reconstruction they had. For example, a camisole bra may help cover surgical scars while a conventional strap bra might be suitable when no tissue has been removed under the clavicle. It may take some trial and error to find a brand, style and size that is most comfortable. A surgeon will recommend the appropriate time to start wearing a prosthesis or undergo further reconstruction. He or she also can advise when substantial healing has occurred so that bra fittings will be most accurate. A physician may write a prescription for any prosthetic device or mastectomy bra so patients' insurance companies will cover them. John Hopkins says that, in the United States, most insurance companies will cover up to four mastectomy bras per year. When properly sized and fitted for a woman's needs, post-mastectomy bras will look natural and feel comfortable.



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# REGROW HEALTHY HAIR AFTER CHEMO

Chemotherapy is designed to attack rapidly dividing cells. Unfortunately, hair follicles are some of the fastest-growing cells in the body. That's why, within a few weeks of beginning chemotherapy treatment for breast cancer, many women report losing some or all of their hair.

BreastCancer.org says that some chemotherapy treatments will only cause hair loss on the head. Others can also cause the loss of hair elsewhere on the body. No treatment can guarantee that hair will not fall out during or after chemotherapy. However, planning ahead for changes in appearance, and taking the steps to help strengthen hair when it begins to grow in again — typically several weeks after treatment — can make a difference.

It's important to note that hair almost always grows back after chemotherapy. However, women must be mindful that there may be some distinct changes when hair grows back. Hair can regrow with a different texture. Hair may be curly when it was once straight. Hair may now be thick instead of thin. Hair color may change as well. Other people experience little to no changes. How quickly hair grows back depends on individual health. It can take up to three months before women get a full a head of hair. As the body recovers from chemotherapy and more effectively processes vitamins and other nutrients, those nutrients will be delivered to hair follicles.

To promote healthier hair growth, individuals may want to try changing their diets to

include ingredients that can be beneficial to hair growth and health. The following are some foods to try.

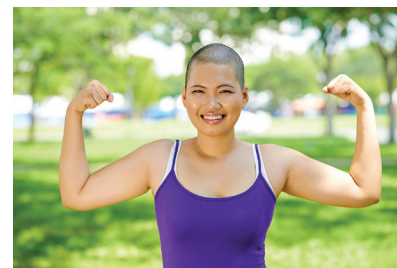
**SALMON:** Salmon and other fatty fish contain omega-3 acids that can fuel shiny, full hair. The body does not make omega-3s, so they must be acquired through food.

**GREEK YOGURT:** Greek yogurt contains an ingredient known as pantothenic acid, or vitamin B5. This can help improve blood flow to the scalp and also may assist against hair thinning and loss.

**IRON:** Iron contained in organ meats, fortified cereals, whole grains, and legumes can protect against hair loss.

**EGGS:** Rich in biotin, eggs can help hair grow. Biotin also helps strengthen brittle fingernails.

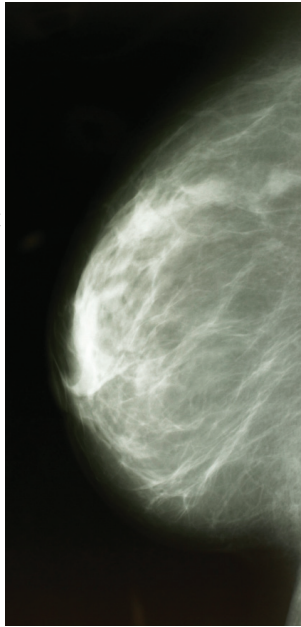
**AVOCADOS:** Avocado contains healthy oils that can fight dry hair and promote shine. Hair loss is a temporary side effect of cancer treatment. With time, patience and a healthy diet, hair can return.



It may take a few months, but hair can be restored after chemotherapy and other cancer treatments have ended.

# Did you know?

Being a woman is the leading risk factor for breast cancer. Only skin cancers exceed breast cancer as the most commonly diagnosed cancer among women in the United States. Although roughly one in 1,000 men are diagnosed with breast cancer each year, the disease most often affects women. The American Breast Cancer Society says that breast cancer is 100 times more common in women than men. A woman now has a one in eight chance of being diagnosed in her lifetime, according to the National Cancer Institute. Although some breast cancers are traced to inherited gene mutations, 85 percent of women diagnosed with breast cancer have no prior family history. Non-Hispanic white women have higher rates of breast cancer incidence, but all women are susceptible. This underscores the importance of being aware of the disease, following recommended screening guidelines and taking notice of any changes that occur in the breasts.



# We Support Breast Cancer Awareness

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