HRT and Your Health

Long linked with breast cancer, combined HRT (estrogen plus progestin) nevertheless was prescribed to protect against osteoporosis, thinking impairment and menopausal hot flashes.

Then came a landmark study that linked HRT to heart disease and stroke in addition to breast cancer — and the evidence has continued to pile up. Women were advised to consult their doctors and weigh HRT risks against the benefits: protection against osteoporosis, menopause symptoms, Alzheimer's disease and dementia.

Now, however, further research questions HRT's ability to fight thinking impairment. In fact, three studies from the Women's Health Initiative have linked HRT with causing higher risk of Alzheimer's disease and dementia in older women. Not only that, but another study found that HRT increased risk of ischemic stroke — the most common type of stroke — by a whopping 44 percent.

What does this mean for you?

For women who are unable to go about daily activities because of hot flashes and other menopause discomforts, a short course of HRT may still be a good option. However, a woman's breast cancer risk and other factors must be weighed as well. Talk with your doctor about the risks and benefits of hormone replacement.

Men and Breast Cancer

About 1,500 men are diagnosed with breast cancer each year. Although breast cancer in men is rare, it's important for men to be aware of lumps or changes in their breast tissue, and to talk with their doctors about them.

Breast Cancer Prevention

Although there is little evidence about breast cancer prevention, several options are being studied:

- **Tamoxifen.** This drug has been used in breast cancer treatment. Since it has been shown to reduce new cancers in women who have taken it for five years, it is now being tested as a cancer prevention treatment.
- **Vitamins.** Synthetic vitamin A, vitamins C and E and phytochemicals (substances found in fruits and vegetables that give them their color) are now being researched as protection against cancer.
- **Preventive mastectomy.** This is a drastic and controversial approach sometimes chosen by women at very high risk for breast cancer. It involves the surgical removal of both breasts.

Don't wait. If you find a breast lump or other problem, tell your doctor right away. Keep in mind that 75 percent of breast changes found by women are due to **benign** (not cancerous), treatable problems. Also remember that cancer is increasingly becoming a disease one can live with.

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BREAST HEALTH

Your Guide to Breast Cancer Awareness

SAMPLE

BREAST CANCER: WHAT YOU SHOULD KNOW

The very words "breast cancer" strike fear into most of us. We've all heard the statistics — one in nine women will get the disease during her lifetime.

But don't let the numbers frighten you. Research about detecting, treating and even preventing breast cancer is ongoing, so be sure to have regular checkups and talk with your doctor.

When Should You Get a Mammogram?

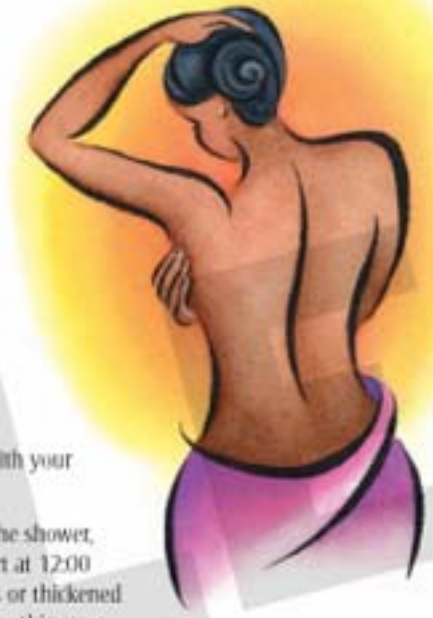
There have been conflicting opinions about when to have a mammogram, particularly for older women. However, mammography screening is still important for early cancer detection — no matter how old you are. The American Cancer Society updated its mammography screening guidelines in May 2003:

- Women age 40 and over should have yearly mammograms and clinical breast examinations. Mammograms should continue for as long as a woman is in good health.
- In their 20s and 30s, women should have a clinical breast exam every two to three years.
- If you have a family history of breast cancer, genetic mutation or have had breast cancer before, talk with your doctor about starting mammograms at an earlier age. Also discuss additional screenings, such as ultrasound or magnetic resonance imaging (MRI), that may be helpful.

What Is a Mammogram?

A mammogram is a special X-ray of breast tissue. It is examined by a radiologist, sometimes with the aid of a computer, for abnormalities that may indicate cancer or another problem. **Screening** mammograms are taken of breasts that have no outward signs of abnormality. **Diagnostic** mammograms are performed when symptoms have been noticed, such as abnormal nipple discharge or a lump.

How to Do a Breast Self-Exam



You may have heard about research suggesting that breast self-examination (BSE) does not increase the number of breast cancers found. However, the American Cancer Society and other experts stress the importance of becoming familiar with your own breasts and the changes they undergo, both during your monthly cycle and as you age, so you can report any changes or problems to your doctor. A good way to do this is to perform BSE. Here's how:

1. CHOOSE a day to perform a BSE each month. The week after your period is usually best, because your breasts are least likely to be tender or swollen. If you are pregnant, nursing or no longer have periods, choose the same day each month.

2. LOOK at your breasts visually in front of a mirror. Look for puckered or dimpled skin, changes in breast size or symmetry or an inverted nipple. Check with your hands behind your head, then on your hips.

3. EXAMINE your breasts with your fingertips. You may want to do this in the shower, since soap and water can make it easier. Think of your breast as a clock face. Start at 12:00 and work your way around in small circles toward the nipple, checking for lumps or thickened areas. Also examine your armpit and the tissue around your breast. Then, perform this same examination lying down with the arm (on the same side as the breast you are checking) resting under your head.

Genetic Testing: Should You or Shouldn't You?

Researchers have located genes within a woman's chromosomes that control the growth of cells in breast tissue. These genes, BRCA1 and BRCA2, may carry a mutation — a change in the genes that is passed down in families. A mutation in the BRCA1 and BRCA2 genes may indicate an increased risk for breast cancer. Tests are now available that can show the presence of mutation in these genes.

However, it's important to keep in mind that there's no absolute predictor of breast cancer risk. Mutation in the BRCA1 or BRCA2 genes does not necessarily mean a future cancer diagnosis, just as an absence of mutation doesn't guarantee a cancer-free life. In most cases, genetic testing is done on a person with a long-standing family history of breast cancer occurring at a young age. It is accompanied by counseling about the test results.

The bottom line: If you'd like to know more about genetic testing, talk with your doctor.

Did You Know?

If you have breast implants, mammograms can be performed as usual. However, be sure to inform the technician and radiologist about your implants. It's important that your mammogram is performed and read by someone experienced in X-raying patients with implants, because they may affect the mammography reading.

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