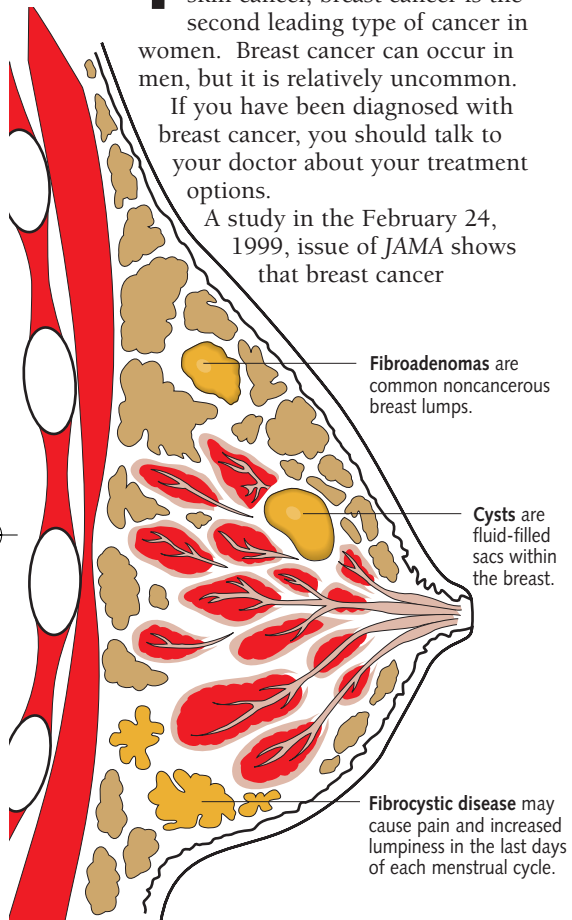


Know your options for breast cancer

If you or someone you love has been diagnosed with breast cancer, you're not alone. After skin cancer, breast cancer is the second leading type of cancer in women. Breast cancer can occur in men, but it is relatively uncommon. If you have been diagnosed with breast cancer, you should talk to your doctor about your treatment options.

A study in the February 24, 1999, issue of *JAMA* shows that breast cancer



treatment varies widely in health maintenance organizations (HMOs) and fee-for-service plans. Depending on the plan and location, women diagnosed with breast cancer after the age of 65 who were enrolled in HMOs could be either more likely or less likely than women in fee-for-service plans to undergo **breast-conserving surgery** (surgery that tries to preserve as much of the original breast tissue as possible) or to receive radiation therapy following surgery.

SCREENING AND DETECTION:

- **Physical examination** – Get examined by a health care professional every 3 years from ages 20 to 40 years and every year thereafter. Women with a family history or previous breast cancers should be examined more frequently.
- **Mammography** – A special low-intensity x-ray of the breast that can find tumors in the breast that are too small to feel by examination. According to the National Cancer Institute, women aged 40 years or older should get a mammogram every 1 to 2 years.
- **Breast self-examination (BSE)** – If you are a woman older than 20 years, you should examine your breasts every month for any unusual changes or lumps. Not all lumps are cancerous, but all lumps should be checked out by a doctor. Ask your doctor or contact the organizations on this page to learn how to do a BSE correctly.

WHO'S AT GREATER RISK?

- Women (11% of women will develop breast cancer in their lifetime)
- Older individuals (far more common in women 60 years and older)
- A person who has a personal history of breast cancer or who has a mother, sister, or daughter who has had breast cancer
- Persons with a specific genetic mutation, known as BRCA1 and BRCA2
- Women who started menstruation early or menopause late
- Women who have never had children or have their first baby after age 30
- Individuals who have had other types of breast disease
- Women who have long-term use of estrogen replacement therapy

WHAT ARE BREAST CANCER STAGES?

The stages of breast cancer (stages I through IV) indicate how far advanced the cancer is. The different stages have different treatment options, with the more advanced stages usually having fewer options available to treat the cancer. It is important to catch the cancer at the earliest stage possible in order to provide the best chances for successful treatment.

TREATMENT OPTIONS:

- **Breast-conserving surgery (BCS)** – Removing the cancerous lump in the breast and some of the surrounding tissue. The surgery is usually followed by radiation therapy. A **mastectomy** is the removal of the entire breast plus surrounding lymph nodes.
- **Radiation therapy** – Using high-dose radiation to kill the cancer cells. Usually used following surgery to control any remaining tumor and to reduce the chance of recurrence.
- **Chemotherapy** – Using drugs to kill the cancer cells.
- **Hormone therapy** – Using drugs that change the way hormones work or removing the organs that produce hormones, such as the ovaries. Chemotherapy and hormone therapy can be used together to lessen symptoms if the cancer has spread.

FOR MORE INFORMATION:

- National Cancer Institute Cancer Information Service
800/4-CANCER
800/332-8615 (TTY) or
www.nci.nih.gov
- American Cancer Society
800/ACS-2345 or www.cancer.org
- OncoLink
University of Pennsylvania Cancer Center
800/789-PENN or
www.oncolink.upenn.edu

INFORM YOURSELF:

To find this and previous *JAMA* Patient Pages, check out the AMA's Web site at www.ama-assn.org/consumer.htm.

Additional Sources: American Cancer Society, National Cancer Institute, OncoLink

Mi Young Hwang, Writer

Richard M. Glass, MD, Editor

Jeff Molter, Director of Science News

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