



Breast Cancer: Awareness and Prevention

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Breast cancer continues to be the most common cancer in women and ranks second among causes for cancer-related death in women globally. Early detection, diagnosis, and appropriate treatment of breast cancer are key to lower the burden of disease and better outcomes. When breast cancer is detected and treated early, the chances of survival are very high. Knowledge and awareness of breast cancer, skills of breast self-examination, confidence to detect breast changes and present promptly to a specialist, are key factors in the prevention, early detection of breast cancer. However, women in many settings, especially in rural areas, face complex barriers including social, economic, geographic, and other inter-related factors, which can limit their access to timely, affordable, and effective breast health care services.

Breast cancer is the most frequently diagnosed cancer in women globally. Early diagnosis of breast cancer may lead to more favorable outcomes and longer survival. Efforts to raise awareness of breast cancer risk factors, benefits of screening, and treatment options remain necessary. To reduce the global burden of breast cancer, the transdisciplinary approach falls into these categories: (1) lifestyle modifiers of risk; (2) early detection and risk reduction; (3) recent research in breast cancer prevention.

Age at menarche, age at first full-term pregnancy, and age at menopause have a major impact on breast cancer incidence in women. Early age at menarche, late first full-term pregnancy, and late menopause are associated with increased risk of breast cancer. Oral contraceptive use only has a small increased risk of breast cancer, while hormone replacement therapy (HRT) has a powerful effect

on breast cancer. The Women's Health Initiative (WHI) trial data showed that HRT in combination with oestrogen plus progestin for 6-7 years nearly doubled the risk of breast cancer (Chlebowski, *et al.* 2009) [1]. While oestrogen without progestin in women with prior hysterectomy showed a slight reduction in breast cancer.

Early detection of breast cancer is challenging and the key factor to reduce morbidity and mortality of the disease. The capacity to effectively diagnose and treat clinically detectable breast cancer begins with clinical breast assessment (CBA) by taking a medical history and performing a focused physical examination including clinical breast exam (CBE). CBE is followed by diagnostic imaging, and tissue sampling with pathologic evaluation, the so-called "triple test" of breast diagnosis [2]. Ultrasonography is more widely available and valuable in the assessment of breast masses. Ultrasonography can distinguish between probably benign masses and suspicious masses. In contrast, mammography has high specificity but has reduced sensitivity in women with high breast density.

Screening is the single most important public health strategy to reduce mortality from breast cancer. Population-based screening modalities like breast self-examination (BSE) or clinical breast examination (CBE) and mammography have been associated with early detection and reduced mortality of breast cancer [3].

Breast cancer survival is largely dependent on a woman's access to timely, effective, and affordable care. Early detection is critical to breast cancer survival. When coupled with timely access to treatment, appropriate follow-up, and survivorship care, there can be significant reductions in breast cancer mortality.

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