



BREAST CANCER AWARENESS GUIDE

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Breast Cancer Awareness

Tips when choosing a cancer doctor

Well wishes may come in waves when people begin to let loved ones know they have been diagnosed with cancer. Such wishes may express sentiments like “Get well soon” or “You can overcome this,” but rarely will patients hear, “Good luck with your doctor.” People who have never before battled cancer may not know it, but their choice of which medical professionals will guide their cancer treatment is theirs to make, and the decision can determine if their journey to beating cancer is a smooth or bumpy road.

Choosing an oncologist is a significant decision. Patients will want a doctor with experience treating their specific type of cancer, but they also can benefit from working with an oncologist who’s receptive to their questions and concerns. The Rogel Cancer Center at the University of Michigan notes that, unless patients are experiencing urgent symptoms like nausea, vomiting and pain, they have time to look for an oncologist.

Few people may know where to begin when looking for an oncologist. The Rogel Cancer



Center offers the following tips to help make that decision easier.

- Speak with your primary care physician. Primary care physicians do not specialize in treating cancer, but they are no doubt familiar if not friendly with various doctors who are. That makes primary care physicians great resources.

- Emphasize communication. Look for an on-

cologist who keeps the lines of communication open and is willing to answer any questions you or loved ones have. Cancer treatment is complicated, and there’s bound to be a few bumps in the road along the way. So patients are liable to have lots of questions, and an oncologist who’s ready and willing to answer those questions and speak in reassuring tones

if complications arise can help calm patients’ nerves.

- Ask yourself some questions. After speaking with some oncologists, ask yourself if you understand each one’s explanations about treatment, prognosis and potential side effects. If your understanding of how your treatment will unfold is uncertain after speaking with an oncolo-

gist, you might want to keep looking.

- Look for a National Cancer Institute-designated cancer center. The Rogel Cancer Center notes that NCI-designated cancer centers have received recognition for their expertise. Such centers also are high-volume and staffed with doctors who specialize in treating various cancers in an assortment of ways.

A list of NCI-designated cancer centers can be found at www.cancer.gov.

Newly diagnosed cancer patients will make many decisions regarding their treatments. One of the most important such decisions involves which doctor will direct treatment.

Breast Cancer Awareness

Is 3D mammography right for you?

Mammograms take images of breast tissue to determine the presence of abnormalities, including lumps. Women may undergo traditional, 2D mammograms, but increasingly many healthcare facilities are now employing 3D technology because it can provide clearer pictures.

A 3D mammogram, also called digital tomosynthesis, takes several different X-rays of the breasts and combines those images to establish a three-dimensional picture. The Mayo Clinic says that a 3D mammogram is typically used to search for breast cancer in

people who may have no outward signs or symptoms. It also may be used to help diagnose the cause of a breast mass or nipple discharge. Doctors may suggest 3D imaging to get a better look at any growths or help identify the source of any



symptoms a person may be concerned about.

Two-dimensional mammograms are still the industry standard. The 3D versions are obtained in a similar fashion by pressing the breasts between two imaging plates. Rather than just taking images from the sides and top to bottom,

the 3D version will take multiple angles to make a digital recreation of the breast. Medical News Today says this enables doctors to look at small, individual sections of the breast tissue that may be as thin as just a single millimeter.

A study published in the journal JAMA Oncology says cancer detection rates

are higher in people who do 3D imaging over time. Three-dimensional mammograms can be useful for women with dense breast tissue or those at higher risk for breast cancer. Although experts at MD Anderson Cancer Center advise any woman who needs a mammogram to get the 3D version. How-

ever, 3D mammography may not be covered by all insurance plans.

It's important to note that a 3D mammogram releases the same amount of radiation as a traditional mammogram. It is of no greater risk to the patient, and it is approved by the Food and Drug Administration. Also of note,

because 3D mammograms produce more images, it may take a radiologist a little longer to read one than it would a 2D mammogram.

Three-dimensional mammograms are an option for women screening for breast cancer.

Breast Cancer Awareness

Women diagnosed with breast cancer who want to speak with someone who has survived the disease can do so thanks to a unique program sponsored by the American Cancer Society. The Reach to Recovery program from the ACS connects current cancer patients with breast cancer survivors via an online chat. Patients, regardless of where they are in their cancer journeys, can connect with volunteers for one-on-one support. Volunteers can help patients cope with treatment and side effects while also offering advice on speaking with friends and family, working while receiving treatment and more. Even people facing a possible breast cancer diagnosis can sign up. The program works by asking patients and volunteers to join the program and create profiles on the Reach to Recovery website (www.reach.cancer.org). Patients then look for a match by searching volunteer profiles, filtering through suggested matches and sending an online chat request to volunteers.

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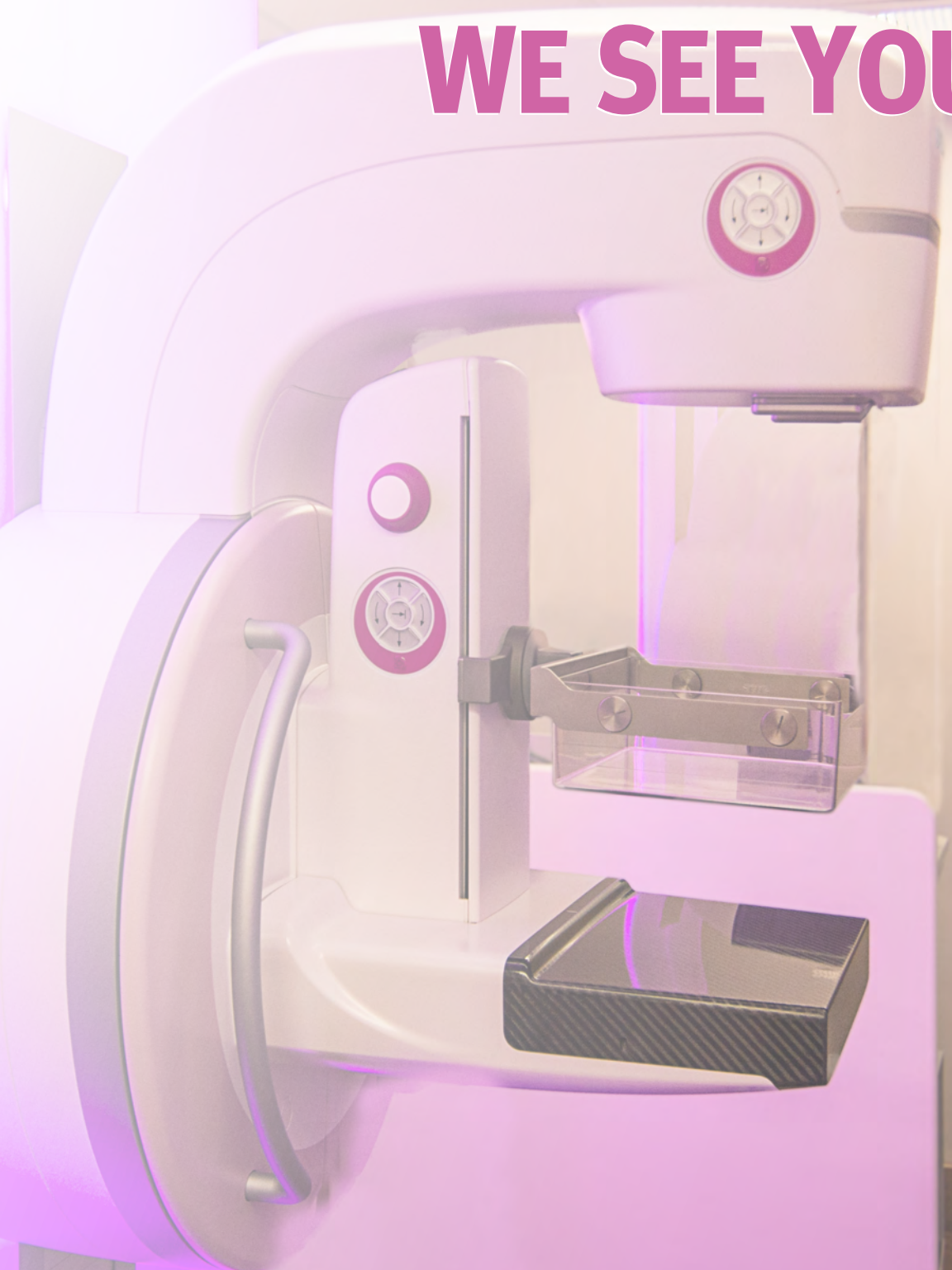
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Breast Cancer Awareness

How breast cancer treatments can affect the immune system

Treatment for breast cancer is highly effective. Five-year survival rates for breast cancer have increased dramatically in recent decades, and much of that success can be credited to cancer researchers and campaigns designed to inform women about the importance of screenings.

Breast cancer is highly treatable, but treatment typically leads to some unwanted side effects. According to Johns Hopkins Medicine, women undergoing treatment for breast cancer may experience a host of side effects, including fatigue, pain, headaches, and dental issues. Cancer treatments, most notably chemotherapy, also can take a toll on women's immune systems.

Why does chemotherapy affect the immune system?

Cancer is caused by an uncontrolled division of abnormal cells in the body. According to Breastcancer.org, chemotherapy targets these abnormal cells, but also can affect fast-growing cells that are healthy and normal. So chemotherapy can damage cells throughout the body, including those in bone marrow. When bone marrow is damaged, it's



less capable of producing sufficient red blood cells, white blood cells and platelets. Breastcancer.org notes that the body is more vulnerable to infection when it does not have enough white blood cells.

Does chemotherapy always weaken the immune system?

The effects of chemotherapy on the immune system depend on various factors. According to Breastcancer.org, a patient's age and over-

all health may influence the effects of chemotherapy on their immune systems. Young, healthy patients may be less vulnerable to infections from weakened immune systems than aging, less healthy patients. However, Susan G. Komen notes that the median age for breast cancer diagnosis in the United States is 63, so many patients are likely to be affected by the impact that treatment can have on their immune systems. The

length of treatment and amount of medicines patients receive also can affect the impact of chemotherapy on patients' immune systems. Breastcancer.org notes that being administered two or more chemotherapy medicines at once is more likely to affect the immune system than just one medication.

Other treatments

Chemotherapy is not the only treatment that can affect breast cancer patients' immune sys-

tems. The Cancer Treatment Centers of America® notes that surgery, radiation, CAR T-cell therapy, stem cell transplants, and even immunotherapy can affect the immune system. Surgery can overtax the immune system and compromise its ability to prevent infections and heal wounds caused by the procedure. Like chemotherapy, radiation therapy can damage healthy cells and lead to an increased risk of infection. And while

immunotherapy is designed to boost the immune system by helping it recognize and attack cells more effectively, it also can lead to an overactive immune system that attacks healthy cells.

Cancer treatment is often highly effective. However, patients may need to work with their physicians to combat treatment side effects that can adversely affect their immune systems.

Breast Cancer Awareness

Are there different types of breast cancer?

Millions of women are diagnosed with breast cancer every year. According to the Breast Cancer Research Foundation, more than 2.3 million women across the globe were diagnosed with breast cancer in 2020. The BCRF also notes that breast cancer is the most frequently diagnosed cancer among women in 140 of 184 countries worldwide.

Breast cancer statistics can give the impression that each of the millions of women diagnosed with the disease is fighting the same battle, but breast cancer is something of an umbrella term. In fact, there are various types of breast cancer, including ductal carcinoma in situ, invasive ductal carcinoma, inflammatory breast cancer, and metastatic breast cancer. Learning about each type of breast cancer can help women and their families gain a greater understanding of this disease.

Ductal carcinoma in situ (DCIS)

DCIS is a non-invasive cancer that is diagnosed when abnormal cells have been found in the lining of the breast milk duct. The National Breast Cancer Foundation notes that DCIS is a highly treatable cancer.



That's because it hasn't spread beyond the milk duct into any surrounding breast tissue. The American Cancer Society notes that roughly 20 percent of new breast cancer cases are instances of DCIS.

Invasive ductal carcinoma (IDC)

IDC is the most common type of breast cancer. The NBCF reports that between 70 and 80 percent of all breast cancer diagnoses are instances of IDC. An IDC

diagnosis means that cancer began growing in the milk ducts but has since spread into other parts of the breast tissue. This is why IDC is characterized as "invasive." Though IDC can affect people, including men, of any age, the ACS notes that the majority of IDC cases are in women age 55 and older.

Inflammatory breast cancer (IBC)

The NBCF describes IBC as an "aggressive and fast growing breast

cancer." Breastcancer.org notes that IBC is rare, as data from the ACS indicates that only about 1 percent of all breast cancers in the United States are inflammatory breast cancers. Many breast cancers begin with the formation of a lump, but Breastcancer.org reports that IBC usually begins with reddening and swelling of the breast, and symptoms can worsen considerably within days or even hours. That underscores

the importance of seeking prompt treatment should any symptoms present themselves.

Metastatic breast cancer

Metastatic breast cancer may be referred to as stage IV breast cancer. When a woman is diagnosed with metastatic breast cancer, that means the cancer has spread, or metastasized, into other parts of the body. The NBCF indicates that metastatic breast cancer usually spreads to the

lungs, liver, bones, or brain. Symptoms of metastatic breast cancer vary depending on where the cancer has spread. For example, if the cancer has spread to the lungs, women may experience a chronic cough or be unable to get a full breath.

These are not the only types of breast cancer. A more extensive breakdown of the various types of breast cancer can be found at <https://www.breastcancer.org/symptoms/types>.

EARLY DETECTION AND BETTER TREATMENT OPTIONS ARE IMPROVING THE CHANCES OF SURVIVING BREAST CANCER!



According to the National Breast Cancer Foundation:

- In 2020, an estimated 276,480 new cases of invasive breast cancer will be diagnosed in women in the U.S. as well as 48,530 new cases of non-invasive (in situ) breast cancer.
- 64% of breast cancer cases are diagnosed at a localized stage (there is no sign that the cancer has spread outside of the breast), for which the 5-year survival rate is 99%.
- This year, an estimated 42,170 women will die from breast cancer in the U.S.
- Although rare, men get breast cancer too. In 2020, an estimated 2,620 men will be diagnosed with breast cancer this year in the U.S. and approximately 520 will die.
- 1 in 8 women in the United States will be diagnosed with breast cancer in her lifetime
- Breast cancer is the most common cancer in American women, except for skin cancers. It is estimated that in 2020, approximately 30% of all new women cancer diagnoses will be breast cancer.
- There are over 3.5 million breast cancer survivors in the United States.
- On average, every 2 minutes a woman is diagnosed with breast cancer in the United States.



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