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INTRODUCTION Breast cancer is a disease in which cells in the breast grow out of control. There are different kinds of breast cancer. The kind of breast cancer depends on which cells in the breast turn into cancer. Breast cancer can begin in different parts of the breast.

A breast is made up of three main parts: lobules, ducts, and connective tissue. The lobules are the glands that produce milk. The ducts are tubes that carry milk to the nipple.

The connective tissue (which consists of fibrous and fatty tissue) surrounds and holds everything together. Most breast cancers begin in the ducts or lobules. Breast cancer can spread outside the breast through blood vessels and lymph vessels. When breast cancer spreads to other parts of the body, it is said to have metastasized. On average, 72 Canadian women will be diagnosed with breast cancer every day. On average, 14 Canadian women will die from breast cancer every day. 26,300 women will be diagnosed with breast cancer. This represents 25% of all new cancer cases in women in 2017.

5,000 women will die from breast cancer. This represents 13% of all cancer deaths in women in 2017. . " The pie graph shown on page 11 shows the percentage of all estimated new cancer and death in women." HISTORY Ancient Egyptians were the first to note the disease more than 3,500 years ago.

The condition was described fairly accurately in both Edwin Smith and George Ebers papyri. One of the descriptions refers to bulging tumors of the breast

that has no cure. In 460 B. C., Hippocrates, the father of Western Medicine, described breast cancer as a humoral disease.

He postulated that the body consisted of four humors - blood, phlegm, yellow bile, and black bile. He suggested that cancer was caused by the excess of black bile. In appearance of the breast cancer too black, hard tumors are seen that burst forth if left untreated to yield a black fluid. He named the cancer karkinos, a Greek word for "crab," because the tumors seemed to have tentacles, like the legs of a crab. Thereafter in A. D.

200, Galen described the cancer as well. He also suggested excessive black bile but, unlike Hippocrates, he postulated that some tumors were more dangerous than others. He suggested medications like opium, castor oil, licorice, sulphur, salves etc.

for medicinal therapy of the breast cancers. During this time of history breast cancer was a disease that affected the whole body and thus surgery was not considered. TYPES OF BREAST CANCER There are many types of breast cancer. There is also Invasive and Non-invasive breast cancer. In invasive breast cancer the cancerous cells break out from the place of origin and affect other nearby cells and organs.

In Non-invasive breast cancer the cancer remains still at the place of origin. It doesn't affect the other cells and organs. The most common types are ductal carcinoma in situ, invasive ductal carcinoma, and invasive lobular carcinoma. Ductal Carcinoma In Situ (DCIS)- Ductal carcinoma in situ (DCIS), is also called intraductal carcinoma and Stage 0 breast cancer. DCIS is a non-invasive or pre-invasive breast cancer. This means the cells that line the

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ducts have changed to cancer cells but they have not spread through the walls of the ducts into the nearby breast tissue. Because DCIS hasn't spread into the breast tissue around it, it can't spread (metastasize) beyond the breast to other parts of the body. Nearly all women with this early stage of breast cancer can be cured.

Invasive (infiltrating) ductal carcinoma (IDC)- This is the most common type of breast cancer. About 8 of 10 invasive breast cancers are invasive (or infiltrating) ductal carcinomas (IDC). IDC starts in the cells that line a milk duct in the breast, breaks through the wall of the duct, and grows into the nearby breast tissues. At this point, it may be able to spread (metastasize) to other parts of the body through the lymph system and bloodstream.

"The diagram shown on page 10 shows the ductal carcinoma." Invasive lobular carcinoma (ILC) - Invasive lobular carcinoma (ILC) starts in the milk-producing glands (lobules). Like IDC, it can spread (metastasize) to other parts of the body. About 1 invasive breast cancer in 10 is an ILC. Invasive lobular carcinoma may be harder to detect on physical exam as well as imaging, like mammograms, than invasive ductal carcinoma. And compared to other kinds of invasive carcinoma, about 1 in 5 women with ILC might have cancer in both breasts. STAGE There are 2 main types of staging systems for cancer.

These are the TNM system and the number system. The TNM staging system TNM stands for Tumour, Node, Metastasis. This system describes the size of the initial cancer (the primary tumour), whether the cancer has spread to the lymph nodes, and whether it has spread to a

different part of the body (metastasised). The system uses letters and numbers to describe the cancer. T refers to the size of the cancer and how far it has spread into nearby tissue - it can be 1, 2, 3 or 4, with 1 being small and 4 large N refers to whether the cancer has spread to the lymph nodes - it can be between 0 (no lymph nodes containing cancer cells) and 3 (lots of lymph nodes containing cancer cells) M refers to whether the cancer has spread to another part of the body - it can either be 0 (the cancer hasn't spread) or 1 (the cancer has spread)

Number staging system

Stage 0: Known as ductal carcinoma insitu (DCIS), the cells are limited to within a duct and have not invaded surrounding tissues.

Stage 1: At the beginning of this stage, the tumor is up to 2 centimeters (cm) across and it has not affected any lymph nodes. Stage 2: The tumor is 2 cm across and it has started to spread to nearby nodes. Stage 3: The tumor is up to 5 cm across and it may have spread to some lymph nodes. Stage 4: The cancer has spread to distant organs, especially the bones, liver, brain, or lungs.

CAUSES

Although the precise causes of breast cancer are unclear, we know the main risk factors. Still, most women considered at high risk for breast cancer do not get it, while many with no known risk factors do develop breast cancer. Among the most significant factors are advancing age and a family history of breast cancer. Risk increases for a woman who has certain types of benign breast lumps and increases significantly for a woman who has previously had cancer of the breast or the ovaries .

A woman whose mother, sister, or daughter has had breast cancer is two to three times more likely to develop the disease, particularly if more than one first-degree relative has been affected. Researchers have identified two

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genes responsible for some instances of familial breast cancer. These genes are known as BRCA1 and BRCA2. About one woman in 200 carries the genes. Having one of them predisposes a woman to breast cancer but does not ensure that she will get it. The greater a woman's exposure to the hormone estrogen, the more susceptible she is to breast cancer. Estrogen tells cells to divide; the more the cells divide, the more likely they are to be abnormal in some way, possibly becoming cancerous. A woman's exposure to estrogen and progesterone rises and falls during her lifetime, influenced by the age she starts and stops menstruating, the average length of her menstrual cycle, and her age at first childbirth.

A woman's risk for breast cancer is increased if she starts menstruating before age 12, has her first child after age 30, stops menstruating after age 55, or has a menstrual cycle shorter or longer than the average 26-29 days. Women who have taken birth control pills in the recent past may have a slightly higher risk of developing breast cancer. This risk goes away if you have not taken birth control pills for at least 10 years. Some studies suggest that taking hormone replacement therapy for menopause with combined estrogen and progestin may increase risk, especially when taken for more than five years. The jury is still somewhat out on this matter, though. Heavy doses of radiation therapy may also be a factor, but low-dose mammograms pose almost no risk.

SYMPTOMS The main symptoms are thickening of breast and formation of any lump on the breast. Pain in breast and armpits that doesn't change with monthly cycle. Redness of the breast skin like the skin of the orange.

A rash around or on the nipple and also discharge of blood from nipple. Change in the size of the nipple. Flaking, peeling or scaling of the skin on the breast or the nipple. Thickening or swelling of part of the breast.

Irritation or dimpling of breast skin. Pulling in of the nipple or pain in the nipple area. Nipple discharge other than breast milk, including blood .

Any change in the size or the shape of the breast. RISKFACTORS 1) Age- At 20 years, the chance of developing cancer is less as 0.6 percent. But at the age of 70 years, it is more like 3.84 percent. 2) Genetics- There are two types of genes that are responsible for breast cancer. These are BRCA1 and BRCA2 that are responsible for risk of developing breast cancer, ovarian cancer or both. TP53 is another gene that is responsible for breast cancer.

3) A history of breast cancer or breast lumps - The women who had history of breast cancer are more likely to develop it again. Sometimes the non-cancerous lump on the breast can change into cancerous cells. So, if this exists women should check with health care professional. 4) Dense Breast tissue - Breast Cancer is more likely to develop in higher density breast tissue. 5) Estrogen exposure and breast feeding - Due to long term exposure to estrogen appear to be cause of breast cancer because the concentration of estrogen become low and high while entering the menopause. And also women who breastfeed more than 1 year are less likely to develop cancer as breastfeeding reduces estrogen. 6) Body Weight - women who are overweight or obese are at more risk of developing cancer due to high level of estrogen. High Sugar content is also a cause of breast cancer.

7) Alcohol Consumption - Women who consume at least 3 drinks a day have 1.5 times higher risk of developing cancer. 8) Cosmetic implants and breast cancer survival - Women with cosmetic breast implants are diagnosed with breast cancer have a higher risk of dying from the disease and a 25 percent higher chance of being diagnosed at a later stage, compared with women without implants. DIAGNOSIS A diagnosis often occurs as the result of routine screening, or when a woman approaches her doctor after detecting symptoms. The doctor may ask about personal and family medical history and do a physical exam. The doctor also may order lab tests, scans, or other tests or procedures.

Diagnostic tests are used to confirm the presence of cancer, identify the type of cancer, identify the grade of the cancer (how abnormal the cells look and behave), find the site where the cancer started (primary tumour), determine the stage of the cancer (how far the cancer has progressed), help plan cancer treatment, monitor response to treatment, help determine if cancer has returned (recurred). SELF EXAM Adult women of all ages are encouraged to perform breast self-exams at least once a month. Johns Hopkins Medical center states, "Forty percent of diagnosed breast cancers are detected by women who feel a lump, so establishing a regular breast self-exam is very important." While mammograms can help you to detect cancer before you can feel a lump, breast self-exams help you to be familiar with how your breasts look and feel so you can alert your healthcare professional if there are any changes. In the Shower: Using the pads of your fingers, move around your entire breast in a circular pattern moving from the outside to the center, checking the entire breast and armpit area. Check both breasts each month

feeling for any lump, thickening, or hardened knot. Notice any changes and get lumps evaluated by your healthcare provider. In Front of a Mirror :

Visually inspect your breasts with your arms at your sides.

Next, raise your arms high overhead . Look for any changes in the contour, any swelling, or dimpling of the skin, or changes in the nipples. Next, rest your palms on your hips and press firmly to flex your chest muscles.

Left and right breasts will not exactly match—few women’s breasts do, so look for any dimpling, puckering, or changes, particularly on one side. Lying Down: When lying down, the breast tissue spreads out evenly along the chest wall. Place a pillow under your right shoulder and your right arm behind your head. Using your left hand, move the pads of your fingers around your right breast gently in small circular motions covering the entire breast area and armpit. Use light, medium, and firm pressure. Squeeze the nipple; check for discharge and lumps. Repeat these steps for your left breast.

LAB TEST High or low levels of certain substances in your body can be a sign of cancer. So, lab tests of the blood, urine, or other body fluids that measure these substances can help doctors make a diagnosis. However, abnormal lab results are not a sure sign of cancer. Lab tests are an important tool, but doctors cannot rely on them alone to diagnose cancer.

BREAST EXAM Your doctor will check both of your breasts and lymph nodes in your armpit, feeling for any lumps or other abnormalities. MAMMOGRAM A mammogram is an X-ray of the breast. Mammograms are commonly used to screen for breast cancer. Patient will stand in front of the mammography machine, and breast is placed between 2 plastic compression plates. The

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plates are then pressed together to flatten, or compress, the breast.

BREAST ULTRASOUND Ultrasound uses sound waves to produce images of structures deep within the body. Ultrasound may be used to determine whether a new breast lump is a solid mass or a fluid-filled cyst.

BIOPSY A biopsy is the only definitive way to make a diagnosis of breast cancer. During a biopsy, your doctor uses a specialized needle device guided by X-ray or another imaging test to extract a core of tissue from the suspicious area. Often, a small metal marker is left at the site within your breast so the area can be easily identified on future imaging

tests. **TREATMENT** Treatment will depend on:

- The type of breast cancer
- The stage of the cancer
- Sensitivity to hormones
- The patient's age, overall health, and preferences

The main options include: 1) **Surgery**–

The types of surgeries are lumpectomy, Mastectomy, Sentinel node biopsy,

Axillary lymph node dissection and reconstruction 2) **Radiation Therapy**–

Controlled doses of radiation are targeted at the tumor to destroy the cancer cells.

Used from around a month after surgery, along with chemotherapy. 3)

Chemotherapy– Medications known as cytotoxic drugs may be used to kill

cancer cells, if there is a high risk of recurrence or spread. This is called

adjuvant chemotherapy. If the tumor is large, chemotherapy may be

administered before surgery to shrink the tumor and make its removal easier.

This is called neo-adjuvant chemotherapy.

4) **Hormone blocking therapy**– Hormone blocking therapy is used to prevent recurrence in hormone-sensitive breast cancers. There are often

referred to estrogen receptor (ER) positive and progesterone receptor (PR) positive cancers. 5) Biological Treatment– Targeted drugs destroy specific types of breast cancer. Examples include trastuzumab, lapatinib and bevacizumab. PREVENTION Many factors over the course of a lifetime can influence your breast cancer risk. You can't change some factors, such as getting older or your family history, but you can help lower your risk of breast cancer by taking care of your health in the following ways. Keep a healthy weight. Exercise regularly (at least four hours a week).

Research shows that lack of night time sleep can be a risk factor. Don't drink alcohol, or limit alcoholic drinks to no more than one per day. Avoid exposure to chemicals that can cause cancer (carcinogens) and chemicals that interfere with the normal function of the body. Limit exposure to radiation from medical imaging tests like X-rays, CT scans, and PET scans if not medically necessary. If you are taking, or have been told to take, hormone replacement therapy or oral contraceptives (birth control pills), ask your doctor about the risks and find out if it is right for you.

Breastfeed any children you may have, if possible. COST REALTED TO CANCER CARE For patients not covered by health insurance, breast cancer treatment typically costs \$15,000-\$50,000 or more for a mastectomy or \$17,000 to \$35,000 or more for a lumpectomy followed by radiation. Chemotherapy can cost about \$10,000-\$100,000 or more, depending on the drugs, the method of administration and the length or number of treatments. Depending on the individual case and the type and number of treatments needed, the total cost of breast cancer treatment, on average, can reach \$100,000 — or, in advanced cases, \$300,000 or more. A

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study published in BMC Cancer found that the average total cost of care over a mean follow-up of 532 days was about \$128,500 for women with metastatic breast cancer receiving chemotherapy as their primary treatment. This includes the cost of the chemotherapy drugs, additional drugs to help manage side effects, administration of the drugs and medical care for chemotherapy-related complications. Mammogram cost \$100 every six to twelve months. Breast cancer patients will need regular follow-up doctor visits and screenings to check for recurrence.

LATEST RESEARCH ON BREAST CANCER Doctors are working to learn more about early-stage and locally advanced breast cancer, including ways to prevent it, how to best treat it, and how to provide the best care to people diagnosed with this disease. The following areas of research may include new options for patients through clinical trials. Always talk with your doctor about the best diagnostic and treatment options for you. Areas of research include research on the causes of early-stage and locally advanced breast cancer, such as endocrine (hormone) disruptors, environment causes, diet, and lifestyle choices, to find other ways to help prevent the disease.

Finding new ways to prevent early-stage and locally advanced breast cancer and to help find breast cancer early. Developing ways to best evaluate the genes and proteins at work in each patient and each breast cancer, to determine the best treatment options for each patient. Determining what early-stage cancers may or may not need chemotherapy. **CONCLUSION** A plan for the diagnosis and treatment of cancer is a key component of any overall cancer control plan. Its main goal is to cure cancer patients or prolong their life considerably, ensuring a good quality of life. In order for a diagnosis and
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treatment programme to be effective, it must never be developed in isolation.

It needs to be linked to an early detection programme so that cases are detected at an early stage, when treatment is more effective and there is a greater chance of cure. It also needs to be integrated with a palliative care programme, so that patients with advanced cancers, who can no longer benefit from treatment, will get adequate relief from their physical, psychosocial and spiritual suffering. Furthermore, programmes should include an awareness-raising component, to educate patients, family and community members about the breast cancer risk factors and the need for taking preventive measures to avoid developing cancer.

References Bibliography A Brief History of Breast Cancer. (n. d.). Retrieved from www.maurerfoundation.org:

<https://www.maurerfoundation.org/a-brief-history-of-breast-cancer/>

About Breast Cancer. (2015). Retrieved from <http://www.cbcf.org>: <http://www.cbcf.org/central/AboutBreastCancerMain/Pages/default.aspx>

Breast Cancer. (2017, 09 17). Retrieved from <https://www.cdc.gov>: https://www.cdc.gov/cancer/breast/basic_info/what-is-breast-cancer.htm

Breast Cancer Latest Research. (n. d.). Retrieved from www.cancer.net: <https://www.cancer.net/cancer-types/breast-cancer/latest-research>

Breast cancer statistics. (n. d.). Retrieved from <https://assignbuster.com>: <https://assignbuster.com/introduction-of-black-bile-in-appearance-of-the/>

). Retrieved from [www. cancer. ca](http://www.cancer.ca): [http://www. cancer.](http://www. cancer. ca/en/cancer-information/cancer-type/breast/statistics/? region= mb)

[ca/en/cancer-information/cancer-type/breast/statistics/? region= mb](http://www. cancer. ca/en/cancer-information/cancer-type/breast/statistics/? region= mb) Breast

Cancer Treatment Cost. (n. d.). Retrieved from [health. costhelper. com](http://health.costhelper.com):

[http://health.](http://health. costhelper. com/breast-cancer. html)

[costhelper. com/breast-cancer. html](http://health. costhelper. com/breast-cancer. html) Cancer Control. (n. d.).

Retrieved from [www. ncbi..nlm. nih. gov](http://www.ncbi.nlm.nih.gov): [https://www. ncbi. nlm.](https://www.ncbi.nlm.nih.gov/books/NBK179047/)

[nih. gov/books/NBK179047/](https://www.ncbi.nlm.nih.gov/books/NBK179047/) Daignosis. (n. d.

). Retrieved from [www. cancer. ca](http://www.cancer.ca): [http://www. cancer.](http://www. cancer. ca/en/cancer-information/diagnosis-and-treatment/diagnosis/? region= on#ixzz54gfykkpp)

[ca/en/cancer-information/diagnosis-and-treatment/diagnosis/? region=](http://www. cancer. ca/en/cancer-information/diagnosis-and-treatment/diagnosis/? region= on#ixzz54gfykkpp)

[on#ixzz54gfykkpp](https://www.news-medical.net/health/History-of-Breast-Cancer.aspx) History of Breast Cancer. (n. d.). Retrieved from [www.](https://www. news-medical. net)

[news-medical. net](https://www. news-medical. net): [https://www.](https://www. news-medical. net/health/History-of-Breast-Cancer.aspx)

[news-medical. net/health/History-of-Breast-Cancer. aspx](https://www. news-medical. net/health/History-of-Breast-Cancer.aspx) Japan, S.

(n. d.). Breast Cancer. Springer, 24. Retrieved 2017, from [https://link.](https://link.springer.com/journal/volumesAndIssues/12282)

[springer. com/journal/volumesAndIssues/12282](https://link. springer. com/journal/volumesAndIssues/12282) Stages of cancer.

(2017, 12 11). Retrieved from [www. cancerresearchuk.](http://www.cancerresearchuk.org)

[org: http://www. cancerresearchuk. org/about-cancer/what-is-cancer/stages-](http://www. cancerresearchuk. org/about-cancer/what-is-cancer/stages-of-cancer#what)

[of-cancer#what](https://www.cancer.org) TYPES OF BREAST CANCER. (n. d.). Retrieved from [www.](https://www. cancer. org)

[cancer. org](https://www. cancer. org): [https://www. cancer.](https://www. cancer. org)

org/cancer/breast-cancer/understanding-a-breast-cancer-diagnosis/types-of-breast-cancer/dcis. html What you need to know about breast cancer. (2017, november 27). Retrieved from [www. medicalnewstoday.](http://www.medicalnewstoday.com)

com: [https://www. medicalnewstoday. com/articles/37136. php](https://www.medicalnewstoday.com/articles/37136.php) [www. cancer. gov.](http://www.cancer.gov) (n.

d.). Retrieved from Diagnosis and Staging: [https://www. cancer. gov/about-cancer/diagnosis-staging/diagnosis](https://www.cancer.gov/about-cancer/diagnosis-staging/diagnosis)