Breast cancer

Health & Medicine, Nursing

BREAST CANCER BREAST CANCER Health experts have found that the risk factors associated with the development of breast cancer can be divided into three major categories, which are lifestyle, genetic, and medical conditions (Nelson, Smith, Griffin and Fu, 2013). As far as lifestyle risk factors are concerned, four major conditions that can mentioned, all of which pose some level of risk to women. In terms of premenopausal breast cancer, smoking has been found to be the most likely risk factor (Wallace, 2012). This notwithstanding, menopausal breast cancer is also higher in women who smoke. Overall, women's risk of getting breast cancer is said to increase by 35-50% (Gøtzsche and Nielsen, 2011). Another risk factor has to do with lack of activity. In this, there continues to be variable rates of increase in risk. The main issue however remains that activeness is very necessary for all women to ensure that they are kept safe from the risk factor of inactiveness. The third major lifestyle related risk factor has been found to be the use of oral contraceptive, where premenopausal breast cancer is said to be the most likely in this situation (Wallace, 2012). This means that the onset of breast cancer with the use of oral contraceptive is very high as compared to the rate of onset for other risk factors (Gøtzsche and Nielsen, 2011). The last risk factor under lifestyle is diet, where high fat and high alcohol intake have been noted to be major risks.

In terms of genetic risk factors, Nelson, Smith, Griffin and Fu (2013) mentioned that there are genetic susceptibility that play minor part in some cases of breast cancer. The causes of breast cancer as associated with genetics have however been quoted to be less than 10% in most of the case. The average range has often been given as 5% to 10% with variations

occurring, depending on the number of relatives with the situation. Gøtzsche and Nielsen (2011) actually stressed that the probable rate of cause for people with 0, 1 and 2 relatives with the disease is 7. 8%, 13. 3%, and 21. 1% respectively. There are actually women who have been found to develop hereditary breast-ovarian cancer syndrome as a result of genetics but the rate given in this instance has been found to be only 5%. On medical conditions as risk factor, Nelson, Smith, Griffin and Fu (2013) mentioned that there are some diseases that increase the risk of women of getting breast cancer. Typical example of this has been mentioned to be diabetes mellitus. What is more, fibrocystic breast has been found to be common among those with benign breast conditions. The consequential condition leading to breast cancer for women like this has been found to be the onset of atypical ductal hyperplasia.

There have been several interventions that have been put in place in dealing with women's health, especially treatment of menopause. One of the interventions is what has been carried by the Women's Health Initiative. The result of the initiative, which focused on hormone therapy (HT) in menopausal women have changed so many ways in which treatment of menopause is done. The first of this has to do with changes in the clinical thinking on oestrogen therapy and its role in curbing the situation without the need for any dramatic medical sessions (Womens Health Initiative Study Group, 1998). What is more, the result of the initiative, which took place as the only randomized, double-blind trials of estrogen therapy, has shifted attention very much onto disease prevention in menopausal women. Until this result, which can well be described as a breakthrough was found;

greater portions of treatment of menopause in women focused on the use of medicines. This was because there was thinking that the situation was simply uncontrollable. This has however changed with more secondary prevention that is even focusing on coronary artery disease in addition to other common conditions like breast cancer (Womens Health Initiative Study Group, 1998).

References

Gøtzsche PC and Nielsen M (2011). " Screening for breast cancer with mammography". Cochrane Database Syst Rev (1): CD001877.

Nelson HD, Smith ME, Griffin JC and Fu R (2013). " Use of medications to reduce risk for primary breast cancer: a systematic review for the U. S. Preventive Services Task Force.". Annals of Internal Medicine 158 (8): 604–14.

Wallace R. B (2012). The Women’s Health Initiative: The Role of Hormonal Therapy in Disease Prevention. Retrieved July 5, 2014 from http://c. ymcdn. com/sites/www. acpm. org/resource/resmgr/perpectives-files/perspectives_WHI. pdf

Womens Health Initiative Study Group (1998). Design of the Womens Health Initiative clinical trial and observational study. The Control Clin Trials; 19: 61-109.