

Editorial

Breast Cancer: An Overview

Mohsin Masud Jan

Editor

Every year about 90,000 women are diagnosed with the disease and some 40,000 lose their lives to it; Pakistan has the highest rate of breast cancer occurrence in Asia; one in nine woman is at the risk of contracting it, whereas in India one in every 22 gets it, while in USA it accounts for 29% of all cancers. These statistics are based on the number of women that have accessed treatment at hospitals in Pakistan. We do not know how many more women are out there with breast cancer who have not reached hospitals due to social stigma or any other reason.

In Pakistan, the average age of women getting this disease is 40, in the West it is 50. The disease is being diagnosed among very young girls as well, even as young as age 18.

Another reason hindering the collection of accurate statistics is that women in our culture do not talk about this disease. They hesitate to even mention the word 'breast'. It's just too private. Typically, in Pakistan a woman will not disclose even to her dearest ones that she's been detected with breast cancer. And if the dear ones know, they will try to hide her condition from the outside world. This prevents them from accessing treatment.

This mindset is prevalent even in the educated, elite class of the society. The worst is they'd rather marry off their daughter than treat her. They believe ignorance is bliss.

We are told everything and nothing causes breast cancer. Women who are childless have a higher chance, so do women who have not breastfed, are obese and have had children late, have a family history or are on hormone replacement therapy. And so do women who've had late menopause, been on contraceptive pill and started periods too late or too early. Then the bra factors creep in — wearing a bra for too long during the day or selecting a wrong one can increase the risk of getting breast cancer.

Latest studies suggest that injecting steroids in cows and buffalos during lactation is directly impacting the estrogen levels in women. Estrogen is linked to breast cancer. Additionally, sugar is highly cancerous.

The lack of research in Pakistan on breast cancer is a real problem. Research in bits and pieces is only giving out wrong signals. We need to do something on large scale. We know occurrence of breast cancer among Polish jews is high because of their genetic mutation. We do not know what is causing the

disease in Pakistan. We need to look at our nutrition and for any genetic mutations.

Because of this ambiguity, early detection has become the recommended method to prevent a fatality. Breast cancer responds to treatment very well. There's a 90 per cent recovery chance in early cases, and even in cases of last stage treatment can help them live a comfortable life.

Self-detection is the first and a very important step. Girls as young as 18 must conduct breast examinations periodically. At any age, a lump cannot go unnoticed, even if you're breastfeeding. By age 40 you are supposed to get mammograms every two years. Mammography helps identify growth at a stage when it is not even palpable.

Over the years, the treatment of breast cancer has come a long way. The decision about treatment depends on the doctor who determines the stage of cancer and then goes ahead with the treatment. The staging process depends on different factors, including the size of the tumour, the number of lymph nodes affected and whether the cancer has spread to other parts of the patient's body.

The patients have to go for biopsy followed by surgery and, if required, chemotherapy and radiation. Quite often, all these processes have to be followed to ensure there is no recurrence of this disease. Radiation therapy is hardly available in the government sector as most of the radiation machines are non-operational and out of order.

Not addressing this disease in an organised manner is the main culprit here. Screening of women living in far off areas must be conducted through satellite setups or at family planning institutions. At an average, the treatment of breast cancer cost Rs.400,000 to 500,000 and so, as a matter of fact, early detection is the only solution to cost-effective treatment.

A dearth of training of medical practitioners further complicates the situation. We may have women trained to conduct physical examinations and mammography but the number of female surgeons is very low. Women often hesitate in getting surgeries done by male surgeons.

We should have an organised cancer control programme in the country.

Breast cancer diagnosis is mostly made at advanced stages in Pakistan as very few women go for regular self-checks or screening for breast cancer. Treatment is available according to the stage of the disease.

If detected at an early stage, the lump can be removed through surgery and without doing mastectomy or chemotherapy. But what happens is that most of the women diagnosed with breast cancer are at a stage where they have to get specialised and expensive medical treatment.

Cancer treatment facilities in the country are far less than what is required. According to international standards, there should be a cancer hospital for every 5 million people in a country but in Pakistan there are few.

Pakistan Atomic Energy Commission (PAEC) also has 18 cancer hospitals but these have a limited capacity. Of these 18 hospitals, there are two each in Karachi and Lahore and one each in Islamabad, Gujranwala, Faisalabad, Bahawalpur, Multan, Larkana, Nawabshah, Jamshoro, Quetta, D I Khan, Bannu, Peshawar, Abbottabad and Swat.

We need to address the treatment of breast cancer in an organized manner.