## Awareness Today

hope.

#### BahamaHealth

### The Physician's Pen October 2018



There are many different ways to classify breast cancer. One way that will be discussed in this piece is the hormone receptor classification. Newly diagnosed breast cancers must be tested for estrogen (ER) and progesterone (PR) receptor expression and for over-expression of human epidermal growth factor 2 (HER2) receptors. This information regarding ER and PR positivity lets one know if either the estrogen or progesterone in the body may stimulate the cancer cells to grow. In addition, patients who are ER and/or PR positive are candidates for endocrine (hormonal) therapy as neoadjuvant or adjuvant treatment.



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Hormonal therapy includes medications that either (1) lower the amount of estrogen in your body or (2) block estrogen from supporting the growth and function of breast cells. If the breast cancer cells have hormone receptors, then these medications could help to not further encourage their growth. If the cancer is hormone-receptor-negative (no receptors are present), then hormonal therapy is unlikely to work. This is because the cancer is likely growing independent of these two hormones. HER2 over-expression is present in 20 percent of patients and predicts those who will benefit from HER2-directed therapy. The strategy to block the receptors from this growth factor is similar to that of the hormonal therapy. Still, the frequency of subtypes also varies according to race and some studies show that African American women were less likely to have hormone receptor (ER/PR) positive, HER2-negative disease and more likely to have ER/PR/HER2 negative or "Triple negative" disease.

What does this mean? It means that the patient/physician team has to be ready to be creative. Evidence shows that people with triple negative breast cancer are less advantaged in the first 5 years with regards to prognosis compared to people with hormone receptor positive disease.

Fortunately, with each passing day, researchers are gaining more deep insights about this complex disease. From mapping the human genome to 3-D printing organs; global innovation in healthcare abounds and the future is filled with promise. And for now. this promise is tied with a tiny, pink ribbon.

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#### BREAST SELF EXAM

The American Cancer Society recommends having annual mammograms at age 45, but women who are at least 40 years old should be given the choice of having a yearly mammogram.



ONCE A MONTH, 2-3 DAYS AFTER PERIODS



EXAMINE BREAST AND ARMPIT WITH RAISED ARM



USE FINGERPADS WITH MASSAGE OIL OR SHOWER GEL



UP AND DOWN



WEDGES



**GRCLES** 



EXAMINE BREASTS IN THE MIRROR FOR LUMPS OR SKIN DIMPLING...



...CHANGE IN SKIN COLOR OR TEXTURE...



...NIPPLE DEFORMATION, COLOR CHANGE OR LEAKS OF ANY FLUID

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