

The Arm Our Youths (ArOY) Health Campaign

an OCI Foundation's initiative for Nigerian Youths against breast & cervical cancers

MODULE: BREAST CANCER FACTS

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OUTLINE

1. Relevant facts on breast cancer in Nigeria
2. Survival facts on breast cancers
3. Major risk factors for breast cancer
4. Major symptoms for breast cancer
5. Reducing breast cancer deaths
6. More practical tips on the prevention of breast cancers
7. Screening for breast cancers
 1. Some myths about breast cancer
 2. Trial Quizzes



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References from:

<https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-019-6890-2>



BREAST CANCER: RELEVANT FACTS N NIGERIA 1

- Breast Cancer that affects the breast tissues (so, it can affect men)
 - **So, affects males too (less than 1% of all cases)**
- Accounted for 571,000 of global deaths in 2015
- Incidence increased from 1-in-20 women (1960) to current levels of 1-in-8 women
- Usually more common in developed countries:
 - **But occurrences in Nigeria increasingly matching Caucasian levels**
 - **Due to lifestyle changes like smoking, delayed age of child birth, contraceptive use, etc.**
 - Survival rates in Nigeria is much less, compared to Caucasian levels;
 - **Only one of ten affected women in Nigeria survive**
 - **About 7 out of 10 will survive in the developed world**
 - **Nigeria has no Government-sponsored screening/diagnostic/treatment facilities**
- **SO, EARLY SCREENING AND DETECTION ARE VITAL!**



BREAST CANCER: RELEVANT FACTS N NIGERIA 2

- Age of mean presentation in Nigeria is 42 to 44 years;
- Prognosis in younger patients aged <40 years is poor
- In Nigeria, reported in patients aged 16-96 years
- **OCCURENCES IN NIGERIA:**
 - About 12% occur among women aged <30 years
 - 3.3% at <25 years
 - 0.8% at age ≤20 years
- In Nigeria, there are no other functional preventive programs are in place:
 - **SO, EARLY SCREENING AND DETECTION ARE VITAL**
 - **The OCI Foundation's ArOY Health Campaign is a game-changer!**



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BREAST CANCER: SURVIVAL FACTS

- If detected early, survival rates are around 90%:
 - **Range of 85% to 95%**
- Only 56% survive if diagnosed late
- Among Nigerian Women:
 - **Just 7% see a doctor within 1 month of symptom discovery**
 - **Up to 70% delay for at least 3 months before seeking treatment**



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BREAST CANCER: MAIN RISK FACTORS

- **Gender**: Women are 100 times more to develop it than men
- **Age**: Risk increases with age:
 - Common among women in their 40s in Nigeria
- **Genetics/Family history**:
 - It can be hereditary:
 - However, only about 10% of breast cancers can be inherited
- **Race**: Caucasian (white) women are slightly at higher risk
- **Personal history**: People who have had breast cancer have a greater chance of another



BREAST CANCER: OTHER RISK FACTORS

- Early onset of menstrual cycles: <11 years of age;
- Late menopause (cessation of menstruation): >55 years of age;
- Not having children at all, or having a first child after the age of 30 years;
- Not breastfeeding (or minimal breastfeeding)
- Taking the OCP or HRT, especially when taken for 5 years or longer;
- Gaining a lot of weight in adulthood, especially after menopause;
- Sedentary lifestyle (lack of physical activity) and eating too much fat;
- Drinking a lot of alcohol (more than 2 standard drinks a day)
- Smoking; Etc.



BREAST CANCER: SYMPTOMS

Symptoms suggestive of breast cancer:

- Ulcer in nipple
- Breast lump or swelling
- Lump or swelling in the armpit
- Nipple discharge from one breast only
- Skin dimpling around breasts

These symptoms are generally not suggestive of breast cancer:

- Headaches
- Nipple discharge in a pregnant person
- Pain in the breasts (can be suggestive at times, but not always)
- Chest pain
- Nipple discharge when it is being squeezed



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BREAST CANCER: REDUCING DEATHS

- There are two key ways to reduce breast cancer deaths. These are through:
 1. Breast screening
 2. Health education
- Unlike cervical cancers, there are no vaccinations against breast cancers.



REDUCING DEATHS 1: SCREENING

Breast screening measures include

1. **Breast Imaging:**

- X-rays (called mammography) and/or
- Ultrasound scans.

2. **Clinical Breast Examination:**

- Requires a medical practitioner to examine the woman's breasts
- Usually in a clinic or hospital

3. **Breast Self-examination (BSE):**

- Simple, free, and non-invasive technique that can be practiced by virtually anyone
- The woman examines her own breasts in her own privacy and schedule;
- It is a component of being “breast aware” (discussed later)
- Controversies exist as to the efficacy of BSE in reducing breast cancer deaths
- Evidence indicates that, combined with imaging and CBE, BSE can improve breast cancer outcomes
 - And reduce mortality by as much as 25%.
- In fact, 80% of breast lumps (and >50% of all breast cancers) are found by the women themselves
- Therefore, BSE provides a layer of defence against dying of breast cancer
- It is recommended by the OCI Foundation for Nigerian women (with no real or affordable alternatives)



REDUCING DEATHS 2: HEALTH EDUCATION

- **HEALTH EDUCATION** empowers women to be **“BREAST AWARE”**:
 - By teaching risk factors and early symptoms of breast cancers
 - As well as the techniques to detect suspicious symptoms
- Being **“BREAST AWARE”** includes:
 - Knowing the risk factors of breast cancer
 - Knowing the early symptoms of breast cancers
 - Knowing the techniques to detect suspicious symptoms of breast cancer
 - Being familiar with the normal appearances and feelings of one’s own breasts
 - Knowing when to inform a doctor of any changes noticed in one’s own breasts
 - Knowing and practicing monthly breast self-examination (BSE)



BREAST CANCERS: MORE PRACTICAL PREVENTIVE TIPS

- Breast cancer causes are still not fully known, but the following can help minimize risks:
 - Do not smoke
 - Eat healthy: avoid high fatty or sugary diet PLUS at least 5 portions of fruits/vegies a day
 - Increase physical activity: at least 30 minutes a day, 5 days a week (150 minutes a week)
 - Maintain a healthy body weight: Body Mass Index (BMI) of 20 to 25
 - Avoid alcohol
 - Make BSE a part of your monthly routine
 - Once one attains recommended screening age (below), commence regular screening
- Important BSE notes:
 - It does not necessarily reduce breast cancer
 - Most lumps found may not be sinister
 - But, by improving breast awareness, chances of noticing dangerous changes rises.



BREAST CANCERS: SCREENING

- **For women age 20 to 39 (younger in developing countries):**
 - Monthly breast self-exam (BSE)
 - Clinical breast exam (CBE) by a trained health professional every one to three years.
- **For women aged 40 and older:**
 - A monthly breast self-exam
 - A yearly clinical breast exam by a trained health professional
 - A two-yearly screening mammogram and/or ultrasound starting at age 40, if possible
- **Irrespective of age, those with increased breast cancer risks:**
 - Due to family or personal histories
 - Should discuss with your health care provider
 - Should consider early start of screening mammograms
 - Should consider more frequent clinical breast exams.



BREAST CANCERS: MYTHS

- Family history is not the largest risk factor for breast cancers
- In fact, 8-of-9 women diagnosed with it have no known family history
- Antiperspirants or deodorants do not increase risks
- Trauma to the breast does not increase risks
 - However, some breast cancers can be found follow exams due to trauma
- Breast cancers are not caused by evil spirits
- Breast cancers cannot be caused by evil people through black magic
- Breast cancers are not punishments from God.



THE END

Let us join hands to **Arm Our Youths**

... While Young

... All of them

... Right Now

... **Let's do it for our families, our states,
and for our Country**

THANK YOU!!!!



"...we rise, by lifting others"

