

By Dr YIP CHENG HAR

A chronic disease?

Can breast cancer be considered a chronic disease, and, what are the support systems available to women with breast cancer?

A CHRONIC disease is a disease that persists for a long time. The US National Centre for Health Statistics defines chronic disease as one lasting three months or more.

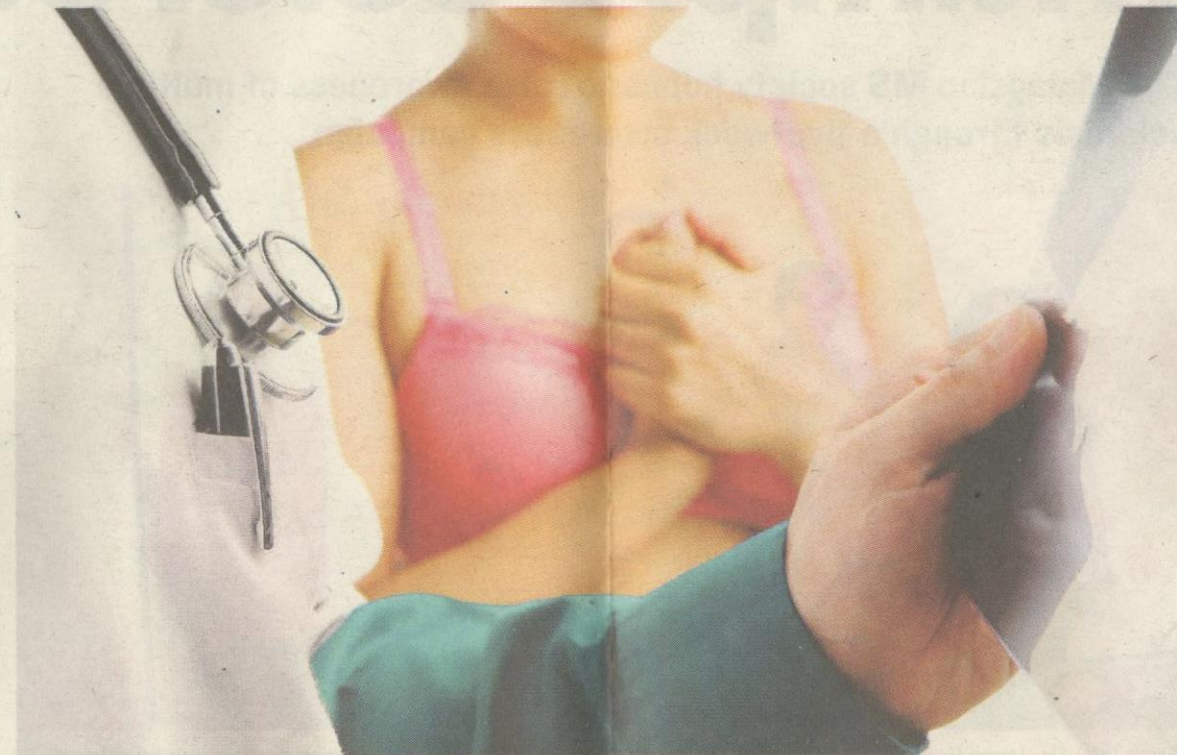
Traditionally, diseases like hypertension or diabetes are considered chronic diseases, while cancers are generally not, as they usually present as a life-threatening condition, requiring urgent attention.

In cancers where treatment options are limited, and diagnosis is usually made at a late stage, such as seen in the majority of lung, gastric, and liver cancer, survival is poor. Hence, such cancers are not likely to be considered as a chronic condition.

Redefining breast cancer

However, survival rates for certain cancers, notably breast, colorectal and prostate, have risen steadily over the past 10 years. Because survival rates for breast cancer have improved so much, there are now more than four million women worldwide who have been diagnosed and treated for breast cancer over the past five years, compared to an incidence of slightly more than a million new cases per year.

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Survival rates of breast cancer has increased to more than 80% in some of the more developed countries. Hence, there are more breast cancer survivors than any other cancer survivors, warranting it to be recognised as a chronic disease. – AFP/Relaxnews

bleak outlook, is being viewed as a chronic disease.

Ultimately, it is important to develop interventions and programmes to meet the needs of the breast cancer survivor. Interventions include decision making tools to assist women to make good decision about surgery, chemotherapy, and their treatment options, including breast reconstruction.

Interventions to help women to better manage their condition is also required so that a woman, after being treated for breast cancer, can move on and live a normal life, somewhat like a woman who has a chronic disease like hypertension, which is so common.

■ This article is contributed by The Star Health & Ageing Panel, which comprises a group of panellists who are not just opinion leaders in their respective fields of medical expertise, but have wide experience in medical health education for the public. The members of the panel include: Datuk Prof Dr Tan Hui Meng, consultant urologist; Dr Yap Piang Kian, consultant endocrinologist; Datuk Dr Azhari Rosman, consultant cardiologist; A/Prof Dr Philip Poi, consultant geriatrician; Dr Hew Fen Lee, consultant endocrinologist; Prof Dr Low Wah Yun, psychologist; Datuk Dr Nor

Hence, there are more breast cancer survivors than any other cancer survivors.

It is no surprise that there are so many breast cancer support groups all over the country, while there is not a single lung cancer support group. Because of the large numbers of women living with breast cancer, the Institute of Medicine in the US now recognise breast cancer as a chronic disease, bringing greater focus to this area of research.

After the cancer

After being treated for breast cancer, there are still a few remaining issues. Chemotherapy can lead to an early menopause. With early menopause, women have to face problems with decreased libido, dry skin, earlier onset of osteoporosis (where the bones become brittle and prone to fracture), hot flushes, and depression.

While the majority of women deal with menopause well, there is a small proportion where menopausal symptoms persist, hence interfering with quality of life. For oestrogen-receptor positive breast cancer (which occurs in up to 60% of women with breast cancer in Malaysia), an anti-oestrogen drug called tamoxifen is prescribed for five years.

In premenopausal women (more than 60% of women with breast cancer in Malaysia are in the premenopausal age group), this may cause menopausal symptoms, such as hot flushes, dry skin, sleep disturbances, and genitourinary symptoms. Hence, these women experience a poorer quality of life.

Side effects of surgery may persist, such as numbness and pain of the upper limb, problems with shoulder movement, and lymphedema. Pain over the chest wall is also a common symptom.

These women also have to deal with discrimination at the workplace. Indeed it is not uncommon for women to be coerced into resigning from their jobs. Insurance companies will also not insure

women with a "history of breast cancer". Because of the stigma that a diagnosis of breast cancer brings, some women do not even tell their family members about their condition.

Quality of life

CanSORT (Cancer Surveillance and Outcomes Research Team) is a multidisciplinary group of investigators based at the University of Michigan and the Ann Arbor VA Centre for Clinical Management Research in the US, and studies the quality of cancer care across a continuum of care, from prevention to survivorship.

CanSORT studies the impact of cancer and its treatment on the quality of life, especially in breast cancer, to understand the unique issues that breast cancer survivors face.

In a study carried out by this group, women interviewed eight months after completion of breast cancer treatment report ongoing symptoms – fatigue, sleep disturbances, breast and arm discomfort, and reduced emotional well-being.

Younger women and women with a poorer health status at the time of diagnosis reported more symptoms, and younger women tended to report a lower quality of life overall.

Apart from discrimination, fear of recurrence persists, even in women with early-stage breast cancer, where the prognosis is excellent.

The slightest twinge of pain, even in their big toe, can send women into a panic and running to their doctors.

This fear of recurrence is difficult to cope with for some women, while others accept it pragmatically and move on with their lives, living every day to the fullest.

The breast cancer experience differs with each woman, as coping mechanisms differ widely between women, based on their previous life experiences, educational level, socio-economic status, and degree of family support.

However, "benefit-finding" is a new concept where a woman, after experiencing a life threatening event, goes on to live life more fully, taking part in activities such as mountain-climbing or trekking.

A family affair

What about the role of the family in women surviving after a diagnosis of breast cancer?

One of a woman's greatest fear is that her husband may leave her because of cancer, and certainly, among the less educated, there are myths that cancer can spread to the spouse and that sexual intercourse will bring on a relapse.

Some women are told by their family members that they cannot eat chicken and a whole host of other types of food, so social life which revolves around eating out,

can be severely curtailed.

This is unlike other chronic diseases like hypertension and diabetes, where there are less superstitions and taboos.

In metastatic breast cancer, where the cancer has spread beyond the breast into areas like the bones, liver and lungs, it meant that it was time to write your will and get your affairs into order, because in the early years, only 10% of women were alive five years after a diagnosis of metastatic breast cancer.

However because of improved treatment, women are living longer with metastatic breast cancer and it is common now to see as many as 40% of women with metastatic breast cancer surviving five years or more. Hence, even metastatic breast cancer, which used to have such a

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