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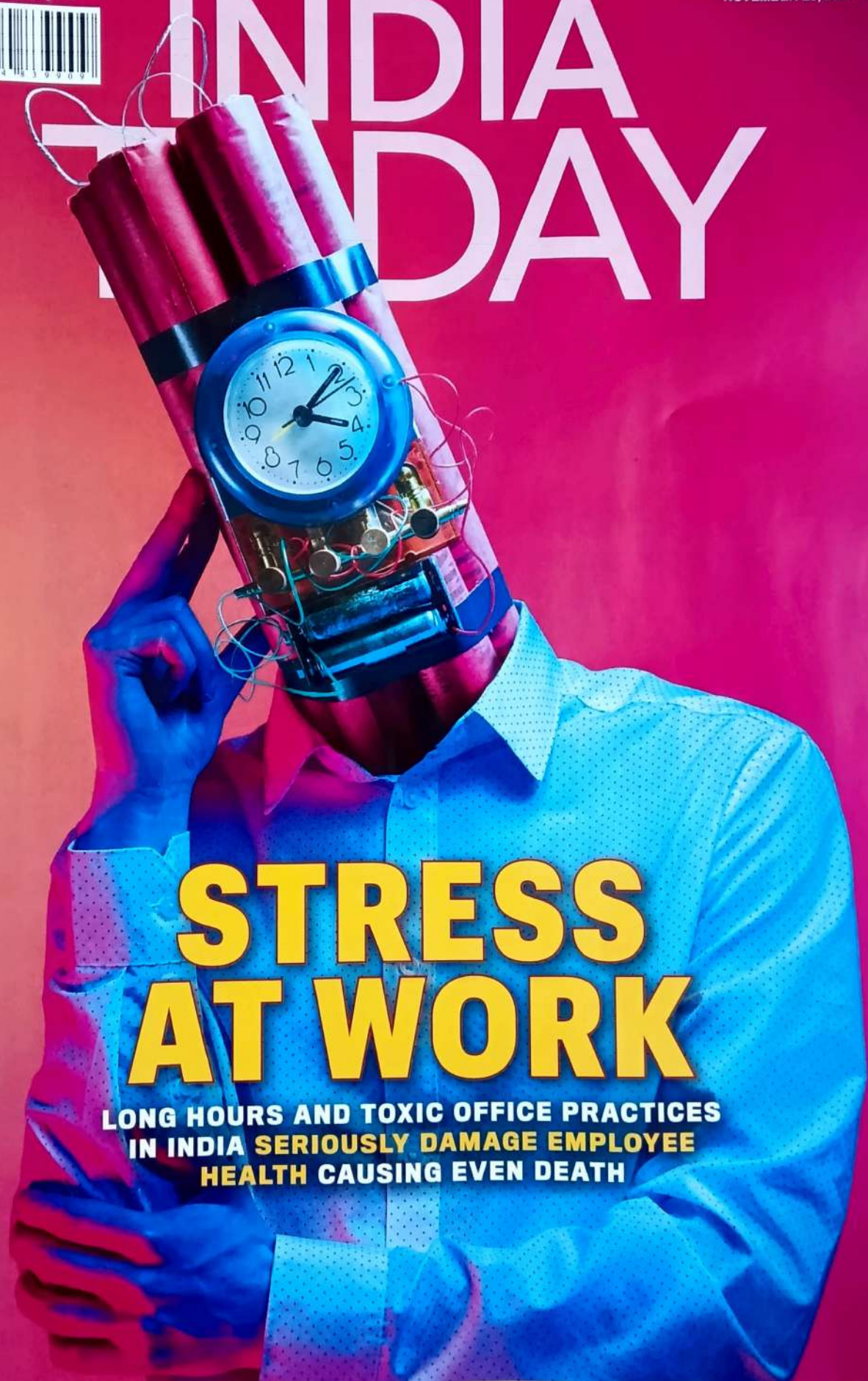
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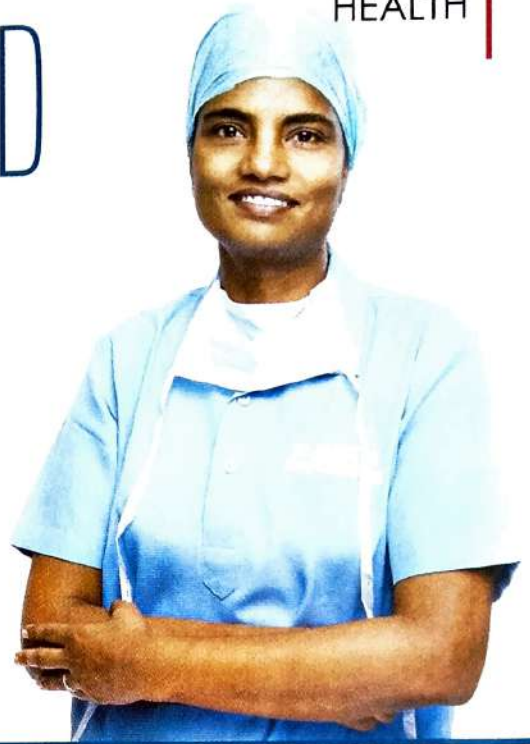
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BREAST CANCER AND ITS RECURRENCE



Breast cancer is the most prevalent cancer among Indian women, accounting for 32% of all female cancer cases. Factors like lifestyle changes and exposure to risk contribute to its rising incidence. Yet, awareness about recurrence and the importance of regular follow-up remains low. Social stigma around cancer often discourages timely medical intervention, and many women are unaware that after treatment, 8-10% of cases show local recurrence, while 11-30% may develop distant metastases.

Dr Amritha Prabha is a Consultant and Associate Professor of Surgical Oncology at Vydehi Cancer Centre, Vydehi Institute of Medical Sciences and Research Centre, Bengaluru. She can be contacted at amrithavrs@hotmail.com



In this interview, Dr. Amritha Prabha gives us an overview of breast cancer recurrence, aiming to educate survivors on risk factors, preventive measures, and the importance of vigilance and regular follow-up.

Q Breast cancer recurrence is a topic of concern for many survivors. Could you start by explaining what exactly recurrence means in the context of breast cancer?

A When we talk about recurrence, we mean the return of breast cancer after a period when it was undetectable, following treatment. Recurrence can occur in three ways: locally, in the same breast or chest wall; regionally, in nearby lymph nodes; or as distant metastasis, in other parts of the body like bones, liver, or lungs. Even with successful initial treatment, some cancer cells may survive and lie dormant, potentially leading to recurrence later on. The risk of recurrence varies depending on factors like the original cancer stage, type, and the treatments received.

Q How common is breast cancer recurrence, and are there particular risk factors that make recurrence more likely?

A The likelihood of recurrence depends on many factors, but overall, around 20-30% of women with early-stage breast cancer may experience recurrence. Specific risk factors include the size and grade of the tumour, lymph node involvement, hormone receptor status, and the presence of specific genetic mutations, such as BRCA1 and BRCA2. Aggressive subtypes like triple-negative breast cancer, for example, are more likely

to recur than hormone receptor-positive types. Lifestyle factors, such as obesity and physical inactivity, may also increase the likelihood of recurrence.

Q What can survivors do to reduce their risk of recurrence?

A There are several effective steps. First, hormone therapy is an important option for those with hormone receptor-positive breast cancer. Treatments that help block estrogen can significantly lower the risk of recurrence. Another crucial step is maintaining a healthy lifestyle. Regular exercise, a balanced diet, and maintaining a healthy weight have been shown to reduce the risk of breast cancer recurrence. Studies indicate that engaging in moderate physical activity—about 150 minutes per week—can make a real difference.

Limiting alcohol intake and avoiding smoking are also essential, as both are associated with an increased risk of breast cancer. Additionally, stress management can be beneficial. While stress itself doesn't directly cause recurrence, it can weaken the immune system, so practices like mindfulness, yoga, or even therapy may help.

Q You mentioned a healthy lifestyle. Are there specific dietary recommendations you give to breast cancer survivors?

A Doc: Absolutely. A diet rich in fruits, vegetables, lean proteins, and whole grains can support overall health. I often recommend minimizing processed foods, refined sugars, and red meats. Foods rich in antioxidants, like berries, leafy greens, and nuts, are beneficial as well. Survivors may also benefit from consulting a nutritionist who specialises in cancer care to help tailor a plan based on their needs.

Q What kinds of tests are recommended for detecting recurrence early?

A Regular follow-up appointments are critical. The specific tests vary depending on each individual's risk factors and treatment history. Most survivors will have routine mammograms for several years after their initial treatment. Additional imaging, like MRIs or ultrasounds, may be used in some cases. The follow-up schedule typically includes more frequent visits in the first few years, with appointments becoming less frequent over time if there are no signs of recurrence.

Q Are there symptoms that survivors should watch for that might indicate recurrence?

A Yes, it's important for survivors to stay vigilant. For local recurrence, symptoms may include a new lump or thickening in the breast or operated scar area, changes to the skin, or nipple discharge. If recurrence is in the lymph nodes, there may be swelling or a lump under the arm. For distant recurrence, symptoms can be more varied, such as bone pain, persistent cough, unexplained weight loss, or fatigue. The key is to report any unusual symptoms to your doctor as soon as possible.

Q That's very helpful. Lastly, what message would you give to breast cancer survivors who are concerned about recurrence?

A I would tell survivors that while recurrence is a possibility, there are many proactive steps you can take to reduce your risk and to catch any issues early. Staying informed and maintaining regular follow-ups with your healthcare team are empowering steps. The advancements in treatments, early detection, and lifestyle modifications make a significant difference in outcomes. So, while it's important to be cautious, there is also reason to feel hopeful and optimistic.