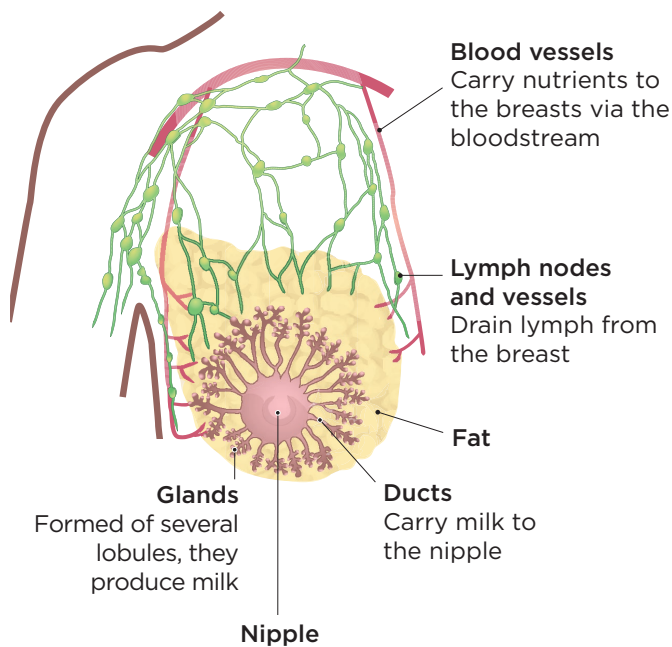


# Breast cancer



You've just learned that you have breast cancer. Here is some information to help you understand the disease and treatments you may have.

## Anatomy of the breast



## What is breast cancer?

This cancer occurs when cells in the glands and ducts multiply uncontrollably. This forms a small mass called a “malignant tumour.”

Sometimes cancer cells break off from the tumour. They may travel to other organs or to lymph nodes, where they create other cancerous tumours - metastases.

## Who is most likely to be affected by breast cancer?

Breast cancer almost exclusively affects women. It may strike at any age, but the average age at the time of diagnosis is in the 50s.

## What are the signs and symptoms of breast cancer?

Breast cancer often advances slowly. Many people do not observe any changes in their breasts.

The cancer may cause certain symptoms. But other diseases can also cause these signs. Here are the main signs that should be evaluated by a doctor:

- small mass in the breast, whether it's painful or not
- small masses called “calcifications” that cannot be felt and are discovered during a screening mammogram (breast X-ray)
- small mass or swelling in the armpit
- change in the size, texture or shape of the breasts
- redness, heat or swelling of the breast
- nipple becoming inverted
- crust or peeling skin on the nipple

## What are the risk factors for having breast cancer?

We don't know what causes cancer, but we do know some of the risk factors.

Here are a few:

- having had breast cancer in the past
- a member of the immediate family (mother, sister, daughter) who has had breast or ovarian cancer in the past
- obesity
- consuming a high-fat diet

Many women who have breast cancer do not present any of these factors. And not all the risk factors are known yet.

## How will my treatments be chosen?

The choice depends on your overall state of health and the characteristics of the cancer.

Several specialists may meet first to discuss your options. Then your doctor will talk with you to determine the best treatments, from the following options:



### > Surgery

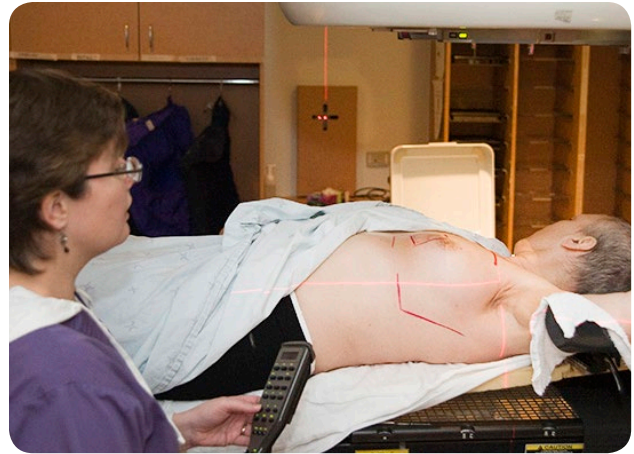
In general, the cancer is removed while keeping most of the breast (partial mastectomy). Sometimes the breast has to be removed completely (total mastectomy).

### > Radiation therapy

Treatment with X-rays directed at the tumour area to destroy any remaining cancer cells.

### > Hormonal therapy

Natural female hormones stimulate the cells of certain cancers to spread. You can take medications known as "hormone inhibitors." They reduce the quantity of hormones in the blood and may slow or stop the growth of cancer cells.



Radiation therapy.

### > Chemotherapy

Sometimes chemotherapy is necessary. Medication is injected into your veins or given orally (in pill form) to destroy the cancer cells.

### > Targeted therapy

This medication is injected to reduce the level of a protein called HER2. That protein stimulates the production of cancer cells (see page 3).

### > Complementary therapies

Massage, osteopathy, yoga, tai chi, meditation and visualization are examples of complementary therapies. They can improve your sense of well-being and reduce your stress.

### Parallel treatments

Some people use medicinal plants, high-dose vitamins or strict diets in the hope of overcoming cancer. Before you consider this type of treatment, talk to a member of your care team. Some of these options can have harmful effects on your basic treatments.

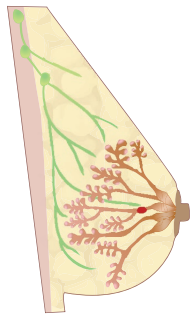
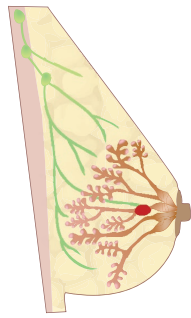
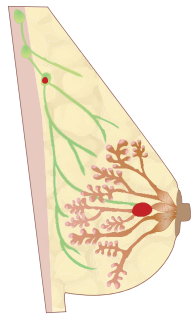
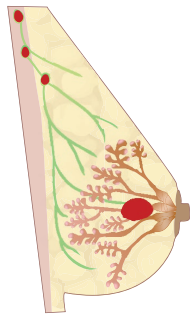
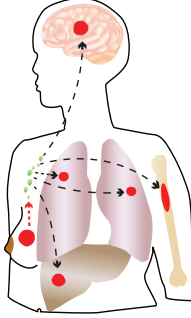
## Cancer characteristics that will help with treatment decisions

The decision will be based on various aspects.

### > Cancer stages

There are 5 stages. A system called TNM – Tumour, Node, Metastasis – is used to decide what stage the cancer has reached. The doctors look to see whether the tumour

is invasive (spreading beyond the ducts), whether it has reached the lymph nodes and whether it has produced any metastases. The size of the tumour is also taken into account.

				
Stage 0	Stage I	Stage IIA/IIB	Stage IIIA/IIIB	Stage IV
Non-invasive or in-situ breast cancer (also known as precancerous)	Invasive cancer located only within the breast	Larger cancer that has affected the lymph nodes	Breast cancer is more advanced locally	Advanced or metastatic breast cancer
Tumours remain within the ducts	Tumours measure less than 2 cm	Tumours measure 2 to 5 cm or cancer cells have invaded 1 to 3 lymph nodes	Tumours measure over 5 cm or cancer cells have reached 4 or more lymph nodes	Presence of metastases (liver, bones, brain, lungs or other locations)

### > Aggressiveness

In addition to staging, cancer is classified by its aggressiveness. There are 3 grades. Grade 1 cancers are developing slowly and are unlikely to spread to other organs. Grade 3 cancers are at higher risk of spreading. Grade 2 is between the two.

### > Presence or absence of hormone receptors

Cancer cells may possess receptors that allow them to be stimulated by natural female hormones (estrogen and progesterone). In that case, treatment may include hormone inhibitors.

### > HER2 protein levels

This protein stimulates the growth of cancer cells. In some women with breast cancer, too much of this protein is produced. In that case, treatment will include medication to block the action of HER2.

## What are the psychological effects of cancer and treatments?

It's normal for the person who has cancer and her friends and family to feel a range of emotions – from sadness to anger or anxiety. It's a good idea to express your emotions to your nearest and dearest, to your care team or to a psychologist.



Changes in your sleeping habits, your appetite or your everyday activities could be signs of psychological problems. Go ahead and ask for help. Among other sources, you can call the psychology department at the hospital. Talk to a member of your care team.

## Will there be any impact on my sex life?

Every woman experiences her sexuality in a different way. It's normal to wonder about this after learning you have breast cancer, during or at the end of treatment.

Talking about your fears with your partner can help you get through this. You can also ask your healthcare team for help. If necessary, you may also be referred to a sexologist.

## Who should I ask for help or answers to my questions?

Call the clinic nurse, Monday to Friday between 8:00 a.m. and 4:00 p.m.

> **514 890-8000, extension 14319**

Outside of business hours, call:

> **514 890-8086**

This support service is available 24 hours a day, 7 days a week. When calling, be sure to have your health insurance card on hand.



### USEFUL RESOURCES

Canadian Cancer Society:

> **1 888 939-3333**

> **cancer.ca**

Quebec Cancer Foundation:

> **fqc.qc.ca**

National Cancer Institute (U.S.):

> **cancer.gov**

Quebec Breast Cancer Foundation:

> **rubanrose.org/en**

breastcancer.org (U.S.):

> **breastcancer.org**

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also find them on our web site

**chumontreal.qc.ca/fiches-sante**

*The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.*

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