

Lifestyle-related Breast Cancer risk factors

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 AMERICAN CANCER SOCIETY

A risk factor is anything that affects your chance of getting a disease, such as breast cancer. But having a risk factor, or even many, does not mean that you are sure to get the disease.

Certain breast cancer risk factors are related to personal behaviors, such as diet and exercise. Other lifestyle-related risk factors include decisions about having children and taking medicines that contain hormones.

Drinking alcohol is clearly linked to an increased risk of breast cancer. The risk increases with the amount of alcohol consumed. Compared with non-drinkers, women who have 1 alcoholic drink a day have a very small increase in risk. Those who have 2 to 3 drinks a day have about a 20% higher risk compared to women who don't drink alcohol. Excessive alcohol consumption is known to increase the risk of other cancers, too.

The American Cancer Society recommends that women who drink have no more than 1 drink a day.

Being overweight or obese after menopause increases breast cancer risk. Before menopause your ovaries make most of your estrogen, and fat tissue makes only a small amount. After menopause (when the ovaries stop making estrogen), most of a woman's estrogen comes from fat tissue. Having more fat tissue after menopause can raise estrogen levels and increase your chance of getting breast cancer. Also, women who are overweight tend to have higher blood insulin levels. Higher insulin levels have been linked to some cancers, including breast cancer.

Still, the link between weight and breast cancer risk is

complex. For instance, risk appears to be increased for women who gained weight as an adult, but may not be increased among those who have been overweight since childhood. Also, excess fat in the waist area may affect risk more than the same amount of fat in the hips and thighs. Researchers believe that fat cells in various parts of the body have subtle differences that may explain this.

Weight might also have different effects on different types of breast cancer. For example, some research suggests that being overweight before menopause might increase your risk of triple-negative breast cancer.

Not being physically active. Evidence is growing that regular physical activity reduces breast cancer risk, especially in women past menopause. The main question is how much activity is needed. Some studies have found that even as little as a couple of hours a week might be helpful, although more seems to be better.

Exactly how physical activity might reduce breast cancer risk isn't clear, but it may be due to its effects on body weight, inflammation, hormones, and energy balance. The American Cancer Society recommends that adults get at least 150 minutes of moderate intensity or 75 minutes of vigorous intensity activity each week (or a combination of these), preferably spread throughout the week.

Women who have not had children or who had their first child after age 30 have a slightly higher breast cancer risk overall. Having many pregnancies and becoming pregnant at an early age reduces breast cancer risk. Still, the effect of pregnancy seems to be different for different types of breast cancer. For a

certain type of breast cancer known as triple-negative, pregnancy seems to increase risk.

Some studies suggest that breastfeeding may slightly lower breast cancer risk, especially if it's continued for 1½ to 2 years. But this has been hard to study, especially in countries like the United States, where breastfeeding for this long is uncommon.

The explanation for this possible effect may be that breastfeeding reduces a woman's total number of lifetime menstrual cycles (the same as starting menstrual periods at a later age or going through early menopause).

Some birth control methods use hormones, which might increase breast cancer risk.

Oral contraceptives: Most studies have found that women using oral contraceptives (birth control pills) have a slightly higher risk of breast cancer than women who have never used them. Once the pills are stopped, this risk seems to go back to normal over time. Women who stopped using oral contraceptives more than 10 years ago do not appear to have any increased breast cancer risk.

Birth control shot: Depo-Provera is an injectable form of progesterone that's given once every 3 months for birth control. Some studies have found that women currently using birth-control shots seem to have an increase in breast cancer risk, but it appears that there is no increased risk in women 5 years after they stop getting the shots.

Birth control implants, intra-uterine devices (IUDs), skin patches, vaginal rings: These forms of birth control also use hormones, which in theory could fuel breast cancer growth. Some studies have shown a link between use of hormone-releasing IUDs and breast cancer risk, but few studies have looked at the use of birth control implants, patches, and rings and breast cancer risk.

When thinking about using hormonal birth control, women should discuss their other risk factors for breast cancer with their health care provider.

Hormone therapy with estrogen (often combined with progesterone) has been used for many years to help relieve symptoms of menopause and help prevent osteoporosis (thinning of the bones). This treatment goes by many names, such as postmenopausal hormone therapy (PHT), hormone replacement therapy (HRT), and menopausal hormone therapy (MHT).

There are 2 main types of hormone therapy. For women who still have a uterus (womb), doctors generally prescribe estrogen and progesterone (known as combined hormone therapy or HT). Progesterone is needed because estrogen alone can increase the risk of cancer of the uterus. For women who've had a hysterectomy (who no longer have a uterus), estrogen alone can be used. This is known as estrogen replacement therapy (ERT) or just estrogen therapy (ET). Combined hormone therapy (HT): Use of combined hor-

mone therapy after menopause increases the risk of breast cancer. It may also increase the chances of dying from breast cancer. This increase in risk can be seen with as little as 2 years of use. Combined HT also increases the likelihood that the cancer may be found at a more advanced stage.

The increased risk from combined HT appears to apply only to current and recent users. A woman's breast cancer risk seems to return to that of the general population within 5 years of stopping treatment.

Bioidentical hormone therapy: The word bioidentical is sometimes used to describe versions of estrogen and progesterone with the same chemical structure as those found naturally in people. The use of these hormones has been marketed as a safe way to treat the symptoms of menopause. But because there aren't many studies comparing "bioidentical" or "natural" hormones to synthetic versions of hormones, there's no proof that they're safer or more effective. More studies are needed to know for sure. The use of these bioidentical hormones should be considered to have the same health risks as any other type of hormone therapy.

Estrogen therapy (ET): The use of estrogen alone after menopause does not seem to increase the risk of breast cancer much, if at all. But when used long term (for more than 15 years), ET has been found to increase the risk of ovarian and breast cancer in some studies.

At this time there aren't many strong reasons to use postmenopausal hormone therapy (either combined HT or ET), other than possibly for the short-term relief of menopausal symptoms. Along with the increased risk of breast

cancer, combined HT also appears to increase the risk of heart disease, blood clots, and strokes. It does lower the risk of colorectal cancer and osteoporosis, but this must be weighed against the possible harms, especially since there are other ways to prevent and treat osteoporosis, and screening can sometimes prevent colon cancer. ET does not seem to increase breast cancer risk, but it does increase the risk of stroke.

The decision to use HT should be made by a woman and her doctor after weighing the possible risks and benefits (including the severity of her menopausal symptoms), and considering her other risk factors for heart disease, breast cancer, and osteoporosis. If they decide she should try HT for symptoms of menopause, it's usually best to use it at the lowest dose that works for her and for as short a time as possible.

Breast implants

Silicone breast implants can cause scar tissue to form in the breast. Implants make breast tissue harder to see on standard mammograms, but additional x-ray pictures called implant displacement views can be used to examine the breast tissue more completely. Certain types of breast implants can be linked to a rare type of cancer called anaplastic large cell lymphoma (ALCL). It's sometimes referred to as breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This lymphoma appears to happen more often in implants with textured (rough) surfaces rather than smooth surfaces. If ALCL does show up after an implant, it can show up as a lump, a collection of fluid near the implant, pain, swelling or asymmetry (uneven breasts). It usually responds well to treatment.

Resource guide

LOCAL SUPPORT:

- * Lake Chelan Community Hospital, Chelan, 682-3300
- * Columbia Valley Community Health, Chelan, 682-6000
- * Lake Chelan Clinic, Chelan, 682-2511
- * Three Rivers Hospital, Brewster, 689-2517
- * Family Health Center, Brewster, 689-3455
- * Cancer Care of NCW, Inc. Our House, Wenatchee: 663-6964 or Email: ccare@nwi.net
- * Wellness Place, Wenatchee, 888-9933. Support groups, and other resources.
- * Cascade Medical, Leaven-

worth, 548-5815.

- * Confluence Health/Wenatchee Valley Medical, 663-8711.
- * Confluence Health, Breast, Cervical and Colon Cancer Health Program, 664-3415.
- * EASE Cancer Foundation, Cashmere: 860-1322 or www.easecancer.org
- * Seattle Cancer Alliance, 800-804-8824, www.seattlecca.org

NATIONAL SUPPORT:

- * American Cancer Society, (ACS) 800ACS-2345, www.cancer.org. Programs include:
- I Can Cope, Look Good, Feel Better, LookGoodFeelBetter.

org, 800-395-LOOK

Reach to Recovery, a one to one survivors' help program.

New Birthday Campaign: Less Cancer, More Birthdays. More-Birthdays.com,

Facebook and blog OfficialBirth-dayBlog.com or Cancer.org/circleofsharing.

- * American Society for Therapeutic Radiology and Oncology. 1-800-962-7876, www.astro.org.
- * American Society of Plastic Surgeons, 888-475-2784, www.plasticsurgery.org.
- * AVON Foundation www.avon-foundation.org

- * Blood & Marrow Transplant Information Network 1-888-597-7674, www.bmtinfo-net.org
- * Y-ME National Breast Cancer Organization 1-800-221-2141. Yourshoes 24/7 support center, y-me.org. (24 hour, translators available in 150 languages).
- * Dr. Susan Love Research Foundation 1-310-230-1712, www.Susan-LoveMD.org. Become a member of Love/Avon www.armyofwomen.org or 866-569-0388
- * Living Beyond Breast Cancer,

888-753-5222


www.lbcc.org.

- * National Breast Cancer Coalition, 1-800-622-2838, www.stopbreastcancer.org or www.canceradvocacy.org
- * National Coalition for Cancer Survivorship
- * Online community Cancer-versary.org use to create your own Web pages
- * Susan G. Komen For the Cure, 1-877-GO-KOMEN, www.komen.org
- * The Breast Cancer Alliance, 203-861-0014, www.breastcanceralliance.org
- * National Lymphedema Net-

work, 1-800-541-3259, www.lymphet.org.

- * SHARE (Breast Cancer Hotline) 1-866-891-2392, www.share-cancersupport.org
- * Vital Options International, 1-800-477-7666 www.vitaloptions.org
- * Zero Breast Cancer: www.zerobreastcancer.org
- * * These are only a few of many national organizations, please call your local hospital, clinic or call

The American Cancer Society for more information in your area. 1-800-ACS 2345.



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5 Great Ways to Relieve Stress


(StatePoint) Stress is a daily part of life but, left unchecked, can be bad for the body, mind and soul. Here are five great ways to reduce tension, relieve stress and feel better.

- Practice Yoga: Yoga is a powerful stress reliever as it combines the benefits of stretching, meditation, controlled breathing and exercise all in one package. It's as simple as unfurling your yoga mat when stress runs high. While studios are easy to find these days, there are plenty of free videos you can find on YouTube when you need to de-stress on your own schedule and at home.
- Play music: Music can reduce stress, particularly when you are the one playing it. But first you need the right gear. Consider this: these days, you don't need a grand-sized home to get the grand piano experience. The slim design of digital pianos, such as the PX-S1000, makes it possible to get the feel and sound of a grand piano in a compact design. And integrated Bluetooth audio lets you connect your device wirelessly to this particular model, so you can also kick back and relax and listen to your favorite music through its powerful stereo amplification system.
- Laugh: Laughter reduces physical and mental tension. So when you're feeling stressed, spend time with friends who make you laugh, turn on your favorite tv show or see some stand-up comedy. Even just smiling can trick you into feeling happier, so if the real laughter isn't forthcoming, consider the old adage – fake it 'til you make it.
- Take a hike: Spending time in nature can reduce stress, ease anxiety and boost feelings of happiness according to the American Heart Association. What's more, the exercise you get on a hike or other outdoor adventure will boost endorphins, working to trigger positive feelings. Just be sure you take along tools to help you navigate the trail and avoid bad weather. High-tech wearables, such as the Casio Pro Trek PRG650Y-1 watch, will keep both hands free for ease on the trail. Designed for comfort and durability, this watch features Triple Sensor technology that tracks bearing, altitude/barometric pressure and temperature.
- Tackle your to-do list: Is the source of your stress a growing to-do list? Pick an item, any item and tackle it today. You'll feel so much better afterward. There is nothing more satisfying than crossing an item off your to-do list. If it helps, start with the easiest item first. The sense of accomplishment will motivate you to keep going. Whether it's playing music or going on a nature walk, reducing stress will help you feel happier and boost your sense of well-being.




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Honoring Breast Cancer Survivors



Linda DeLeon
Is retired and likes to sew. She is a 48year survivor.



Joyce Steele
Is a housewife and loves candy making. She is a 38 year survivor.



Carol L. Forhan
Survivor: 29 years
Occupation: NCW Media, co-owner, and ad manager, ordained Episcopal Deacon.
Interests: Being with my 5 grandchildren and family. Photography.



Orlanna Keegan
Is a retired United States Postal Clerk, (Lake Chelan Post Office). Her interests include church, time with family, travel, and Disney. She is a 26 year, 10 month survivor.



Barbara Rist
Blankenship
Is retired, She likes gardening, reading, yard work, her grandkids, Chelan Senior Center. She is a 22 year, 1 month survivor.



Suzanne Newby
Is retired from Safeway. Her Interests include cooking, crafts, and camping. She is a 22 1/2 year survivor.



Sandi Gruenberg
Is retired. Interests are family, playing with her grandchildren, Chelan Chase, and raising money for Breast Cancer Research. She is a 20 year, 2 month survivor.



Nancy Baum
Is retired and loves kayaking, biking, golfing and boating. She is a 19 year, 10 month survivor



Vicki Hoffman
Is a music assistant with the with Lake Chelan School District; and likes being with her family, especially her granddaughter. She is a 19 year, 4 month survivor.



Karen Gordon
Interests include singing, music, reading and walking. She is 18 year, 8 month survivor.



Joan Lester
Is retired and she is a 17 year survivor.



Lynda Kennedy
Is the owner/operator of Yogachelan Yoga Studio. Her interests include yoga, golf, hiking and gardening. She is a 16 year survivor.



Anne Brooks
Is a school bus driver. Interest includes electric vehicles, being outside and quilting. She is a 14 year, 6 month survivor.



Teresa Flores
Beason
Is retired and likes camping with family, cross stitching and crocheting. She is a 14 year survivor.



Heather Smith
Is a Office Manager and her interests include snowmobiling, reading and camping. She is a 9 1/2 year survivor.



Carolyn Cockrum
Is an office assistant and her interests include golf and gardening. She is a 4 1/2 year survivor.

*In memory of those
who lost the
battle.*



5K Chelan Chase to be held Oct. 19

CHEL - Registration is for the 2019 Chase on October to run or this comservice which benChelan nity Hosproviding



AN - Regopen now Chelan Saturday, 19. Plan walk in munity event efits Lake Commuital by mammo

gram screening and evaluation for uninsured or underinsured women with demonstrated financial need. A portion of the proceeds also go to Wellness Place, an outreach program of Confluence Health which offers resources for all types of cancer patients and their families in North Central Washington.
For more information and to register, go to:
<https://lakechelanrotary.org/chelan-chase/>
This 5K chip timed event starts at 10 a.m. and is open to runners, walkers, wheelchairs, and strollers.
Race meeting Sat., Oct. 19, 9:45 a.m., Riverwalk Park Shelter with race starting at 10 a.m. on the “Old Bridge”. Day or run registration nd checkin at St. Andrew’s Parish Hall Saturday 8-9:30 a.m.
Open to all: runners, walkers, wheelchairs, strollers, families and teams. Divisions: under 12, 13-18, 19-29, 30-39, 40-49, 50-59, 60-69, 70 and over.

Cancer Support Group

CHELAN - The Women’s Wellness Group, cancer support group, meets the second Tuesday of each month at the Lake Chelan Community Hospital Board Room at 11:45 a.m. For more information, contact Anne at 682-8718.

Pink Ribbon Classic - Golf Scramble, Oct. 20

CHELAN - The Pink Ribbon Classic Golf Scramble will take place on Sunday, October 20 at the Lake Chelan Golf Course. The cost to enter the tournament is \$30 which includes lunch after play. The entry fee does not include green fees.
The two-person team format will offer Scramble Play, Closest to the Pin and Long Drive Awards, Mulligans, and the opportunity to have Mark Lawrence the PGA Assistant Professional hit your team drive on Hole #10. There will be Raffles and an Auction during lunch.
The Pink Ribbon Classic Golf Scramble is joining with Chelan Chase and Chelan Rotary in donating all tournament proceeds to the Lake Chelan Community Hospital and Clinic’s Mammography Department to enable free mammogram screenings for individuals who are uninsured or under-insured, and to The Wellness Place in Wenatchee a non-profit entity that provides support for the needs of all cancer patients in North Central Washington.
Golfers of all abilities are welcome and encouraged to play in this fun tournament. No need to have a handicap because you will be provided with one and if you don’t have a partner one will be provided.
For more information please contact Mark Lawrence at 509-682-8026 or mlawrence@cityofchelan.us. Entry forms are also available at the Lake Chelan Golf Course Pro Shop.

The Self-Breast Exam

Because breast cancer is the most common cancer for women today, routine self-examination is an essential step in catching the disease early.

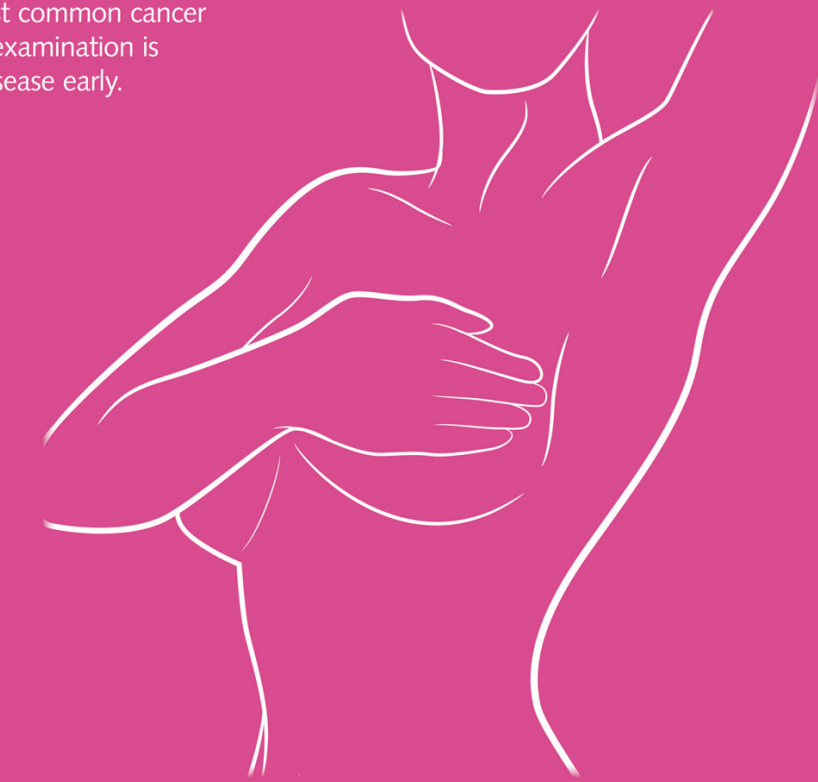
In fact, according to the National Breast Cancer Association, 40 percent of diagnosed breast cancers are detected by women through self-examination.
By examining yourself on a monthly basis, you will quickly become familiar with your breasts and the surrounding tissue and will easily be able to see or feel an abnormality, such as an unusual lump, changes in the skin or any sort of discharge.

HOW TO LOOK

While physically looking down at your breasts is a good start, it is not adequate for a full examination. To view each section of your breasts equally, you must stand in front of a mirror.
Check for dents, pulls and any sort of odd coloring. Be sure to check your breasts standing straight ahead with your arms resting at your sides, again straight ahead with your arms raised above your head, and again leaning slightly forward with your hands on your hips.

HOW TO FEEL

Just as you do with a visual examination, to properly feel your breasts for abnormalities, you must examine them in several positions.
The shower is an excellent location for an exam, because the water helps your fingers glide over the tissue easily. Use the middle part of your first three fingers (rather than the fingertips) to gently move the breast.
Move your hand from the outside of the breast towards the nipple and then back out to the edge. Do not ignore the fleshy part of your armpit, as this is also technically breast tissue and should not be overlooked.



The other position you should perform a breast exam in is flat on your back. When you are lying down, the breast tissue lays evenly along the wall of your chest.
Lift the arm coinciding with the breast you are examining above your head (left arm with the left breast, right arm with the right breast),

and perform the same movements as in the shower.
Use both light and firm pressure and be cognizant of any pain. Keeping a journal of any abnormalities and follow-up doctor visits is a great way to stay on top of your overall breast health.

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