



# Breast Cancer Breaking Down the Myths Follow-up Care after Breast Cancer Treatment

- 除掉對乳腺癌的誤解
- 乳腺癌治療後的後續護理

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# Myth #1: If I have a family history, I'm automatically at higher risk of breast cancer

## 誤解#1 假如我有乳腺癌家族史，我患乳腺癌的風險自然會較高

- \* Because breast cancer is so prevalent, having a family history doesn't always mean you are at higher risk
- \* 因為乳腺癌是如此普遍，有家族史並不一定表示你的風險會較高
- \* Most women with a BRCA gene mutation who get breast cancer are younger (<50 yo) or premenopausal
- \* 大多數有BRCA基因突變，得乳腺癌的婦女是年輕的（<50歲）或停經前

# Is my family at higher risk? 我的家人會有更高的風險嗎？

## \* Rule of 2's: “二的定则”

- \* Two 1<sup>st</sup> degree relatives with early-onset breast cancer

- \* 有兩個第一親屬有早發性乳腺癌

- \* One woman with early-onset breast cancer twice

- \* 一個女人有早發性乳腺癌兩次

- \* Early-onset breast cancer and ovarian cancer

- \* 早發性乳腺癌和卵巢癌

- \* Early-onset breast cancer and male breast cancer

- \* 早發性乳腺癌和男性乳腺癌

→ If this fits you, you should talk to your primary care doctor about your family history

→ 如果這是你的情況，你應跟你主診醫生談談您的家族史

## Myth #2: Eating chicken, eggs, beef, sweets, soy can cause breast cancer

### 誤解#2 吃雞肉，雞蛋，牛肉，甜食，黃豆製品可以導致乳腺癌

- \* There is no direct link between food groups and breast cancer
- \* 任何食物類別跟乳腺癌沒有直接的關係
- \* Studies show that a high soy intake does not increase the risk of breast cancer. Therefore, tofu and soy milk is safe.
- \* 研究表明，吃黃豆類不會增加患乳腺癌的風險。因此，豆腐和豆漿是安全的。
- \* Post-menopausal obesity and weight gain is associated with increased risk of breast cancer.
- \* 停經後肥胖和體重的增加與增加患乳腺癌的風險有關。
- \* Post-menopausal weight loss is associated with a lower risk of breast cancer
- \* 停經後的重量降低與減低乳腺癌的風險有關。

# Myth #2: Diet and breast cancer

## 誤解#2 飲食與乳腺癌

- \* A healthy diet is important to help maintain a healthy weight, which will help lower the risk of breast cancer
- \* 健康的飲食是很重要的，可以幫助維持健康的體重，這有助於降低患乳腺癌的風險。
- \* Low in saturated fat 減低飽和脂肪
  - ✓ Red meat  $\leq$  3 times a week 紅肉每週吃 $\leq$ 3次
  - ✓ Green leafy vegetables 多吃綠葉蔬菜
  - ✓ Limit sweets (to help maintain healthy weight), not because sugar is dangerous 少吃甜食（有助於保持健康的體重），而不是因為糖是危險的
  - ✓ Limit alcohol consumption 限制飲酒

# Myth #3: Mammograms don't work

## 誤解#3：乳房X光檢查是沒有用的

- \* Early detection saves lives 早期發現可拯救生命-
- \* Mammograms detect 70-80% of breast cancers
- \* 乳房X光檢查發現70%至80%的乳腺癌患者
  - Mammogram is the best tool for detecting the earliest stage 0 breast cancer
  - 乳房X光檢查, 是檢測到早期(0期) 乳腺癌的最佳工具。
  - Mammograms can detect cancer before you feel it
  - 乳房X光檢查可以在你還不能摸到以前發現癌症
  - Mammograms are safe 乳房X光檢查是安全的
  - Minimal radiation 最低的輻射
- \* Continue to get annual mammogram
- \* 應繼續每年乳房X光檢查



# Myth #4: Everyone should get a breast Ultra Sound with their MMG

## 誤解#4 每個人作乳房X光檢查時都應做乳房超聲波檢查

- \* Mammograms are less sensitive with dense breast tissue
- \* 乳房X光檢查對組織緻密的乳房比較不敏感
  - May detect up to 50% of breast cancers 可能會檢測到50%的乳腺癌患者
  - Can be harder to see small invasive cancers 可能很難看到小的侵犯性的癌
- \* Ultrasounds can see small invasive cancers 超聲波檢查可檢測到小的侵犯性的癌
- \* ACRIN 6666 study - 2800 women 醫學研究報告，2800女性
  - 42 cancers detected, 12 cancers seen only on US  
檢測到42宗乳腺癌，12宗癌症只有在超聲波檢查時才發現
  - But <10% of abnormal US-biopsies showed cancer
  - 但只有<10% 不正常的超聲波檢查經活檢後發現有癌症
  - Routine breast Ultrasound should not be performed in the absence of symptoms or abnormal mammogram
  - 沒有症狀或異常的乳房X光檢查的話，不必做常規的乳房超聲波檢查

# Myth #5: Surgery causes the cancer to spread

## 誤解#5 手術會導致癌的擴散

- \* Surgery is the mainstay of treatment for breast cancer
- \* 手術是治療乳腺癌的主要治療
- \* Surgery does not cause the cancer to spread
- \* 手術不會導致癌擴散
- \* Surgery is important to get rid of the cancer in the breast and hopefully prevent the future spread of the cancer
- \* 手術治療是很重要的，除掉乳房上的癌，能防止癌未來的擴散



# Myth #6: Mastectomy is safer than a lumpectomy

## 誤解#6 乳房切除手術比乳房腫瘤切除安全

- \* Studies show that the overall survival rates between lumpectomy and mastectomy are the same
- \* 研究表明，乳房腫瘤切除術和乳房切除術的整體存活率是相同的
- \* Remember: women don't die from breast cancer cells in their breast, they die when the cancer cells spread to other organs
- \* 請記住：女人不會死於自己乳房中的癌細胞，而是死於癌細胞擴散到其他器官
- \* Lumpectomy and radiation is a safe alternative to mastectomy
- \* 乳房腫瘤切除術加乳房輻射治療是乳房切除術的安全代替

# Myth #7: After breast surgery, I should not use my arms normally, or they will swell

## 誤解#7 乳腺癌手術後，我不應該用我的臂膀，以防腫脹

- \* Sometimes, after lymph node surgery, lymphedema can develop
- \* 有時淋巴結手術後，淋巴水腫可能發生
  - Occurs in 10-20% of patients who have an axillary node dissection
  - 發生在10%至20%腋窩淋巴結切除者
  - Occurs in 3% of patients who only have a sentinel node biopsy
  - 發生在3%前哨淋巴結活檢者
- \* Historical guidelines recommend no IV, blood pressure measurements, or blood draws
- \* 傳統的指引建議避免靜脈輸液，血壓測量，抽血

# Avoiding lymphedema

## 避免淋巴水腫

- \* Avoid blood draws, blood pressure measurements, or IVs when possible (but within reason)
- \* 避免抽血，測量血壓，或靜脈輸液（在合理的範圍內）
- \* After recovery, progressive light weight exercises (ask your doctor)
- \* 恢復後，漸進式地去做輕重量運動（請詢問您的醫生）
- \* Early identification of lymphedema and institution of treatment can treat and reduce lymphedema
- \* 早期確定淋巴水腫並進行治療，可以治療和減少淋巴水腫
  - Manual lymphatic drainage (massage) 手動淋巴引流（按摩）
  - Compression bandages 壓縮繃帶

# Myth #8: Radiation causes you to lose your hair

## 誤解#8 放射治療會導致你失去你的頭髮

- \* Radiation is important after lumpectomy to reduce the risk of the cancer coming back in the same breast
- \* 放射治療在腫瘤切除術後是重要的，可減少癌症在同一乳房發生的風險
- \* Radiation is a local therapy directed at the breast itself and does not cause hair loss
- \* 放射治療是一種針對乳房的局部治療，不會導致脫髮
- \* Standard radiation is given Mon-Fri for 6 weeks
- \* 標準的放射治療是週一至週五連續6個星期，
  - Side effects: skin erythema, breast tenderness, fatigue
  - 副作用：皮膚出現紅斑，乳房脹痛，疲勞

# Myth #9: Breast reconstruction is not safe

## 誤解#9 乳房重建是不安全的

- \* Breast reconstruction is safe 乳房重建是安全的
- \* Breast reconstruction does not increase the risk of cancer recurrence after mastectomy
- \* 乳房切除後乳房重建不會增加癌症復發的風險
- \* Breast reconstruction does not make it harder to detect cancer recurrence after mastectomy
- \* 乳房重建，不會導致難以檢測乳房切除術後的癌症復發
- \* It is a longer surgery and recovery, because you are combining two procedures into one
- \* 因這是兩個手術合併為一，所以手術時間較長，恢復期也較長

# Myth #10: There is nothing I can do to reduce my risk of getting breast cancer again

## 誤解#10 我沒辦法減低乳腺癌復發的風險

### \* Medications 藥物

- Tamoxifen, Arimidex, Femara, Aromasin
- 他莫昔芬，瑞寧得，Femara, Aromasin
- Reduce your risk of getting breast cancer again by up to 50%. It is important to take the medications regularly.
- 減少高達50%再患乳腺癌的風險。重要的是要定期服藥。

### \* Diet 飲食

- A healthy diet which maintains a healthy weight, avoids weight gain, helps weight loss will lower the risk of breast cancer recurrence
- 健康的飲食習慣，可以保持健康的體重，避免體重增加，有助於減肥並會降低乳腺癌復發風險



# Reducing your risk of breast cancer recurrence

## 降低乳腺癌復發的風險

### \* Exercise 運動

- Regular exercise has been consistently shown to lower the risk of breast cancer recurrence
- 常規的運動，已被證明可以降低乳腺癌復發風險
  - \* 30-50% risk reduction 降低風險 30-50%
  - \* Related to weight loss, but also other biological mechanisms
  - \* 與降低體重有關，但也與其他生物機制有關
  - \* Moderate exercise 30 minutes 5 days a week is strongly encouraged
  - \* 強烈建議：適度運動30分鐘，每週5天，

# \*Follow-up Care after Breast Cancer Treatment

## 乳腺癌治療後的後續護理

# How often do you see your doctor? 你應該多常見你的醫生？

- \* You will need to see your doctor to review your medical history and get a physical exam periodically after you complete your cancer treatment 完成癌症治療後應定期見你的醫生，審查病歷，作身體檢查
  - This is generally with the medical oncologist, although you may continue to follow-up with your surgeon and radiation oncologist as well 一般情況下，你應見你的腫瘤醫生，但你也可以繼續與你外科醫生和放射腫瘤醫生作後續檢查
- \* Years 1-3: every 3-6 mo 第1-3年：每3-6個月
- \* Years 4-5: every 6-12 mo 第4-5年：每6-12個月
- \* After year 5: once a year 5年以後：每年

# What symptoms should you look for?

## 你應注意什麼症狀？

- ✓ New lumps in the breast or underarm 在乳房或腋下有新的腫塊
- ✓ Rash on the breast 乳房上有紅疹
- ✓ Nipple discharge 乳頭溢液
- ✓ Bone pain 骨頭疼痛
- ✓ Chest pain 胸部疼痛
- ✓ Abdominal pain 腹部疼痛
- ✓ Shortness of breath or difficulty breathing 呼吸短促或困難
- ✓ Persistent headaches 持續性頭痛
- ✓ Persistent coughing 持續咳嗽

# How often do you get a mammogram? 你應多久作一次乳房X光檢查？

If you have a lumpectomy, 如果你做了乳房腫瘤切除術：

- \* You may need a repeat mammogram after surgery to ensure all calcifications were removed
- \* 你可能需要在手術後，再作乳房X光檢查，以確保所有的鈣化點已被割除
- \* You will need a mammogram on the cancer side 4-6 months after you complete radiation
- \* 完成輻射治療4-6個月後，對另一側乳房做X光檢查
- \* Afterwards, you should continue to have a bilateral mammogram annually
- \* 之後，應該繼續每年對兩個乳房作X光檢查

# How often do you get a mammogram? 你應多久作一次乳房X光檢查？

If you have a mastectomy, 如果你做了乳房切除手術

- \* You do *not* need any more breast imaging on the cancer side
- \* 你不需要對有癌症的乳房做X光檢查
- \* You should schedule a mammogram on the non-cancer side **one year** after your first mammogram that led to the diagnosis, and then annually
- \* 你應安排於被診斷癌症的乳房X光檢查後一年，對非癌側的乳房做X光檢查，然後每年做X光檢查



# How often do you see your gynecologist? 你應多常見你的婦科醫生？

- \* Women with a BRCA gene deleterious mutation have an increased risk of breast and ovarian cancer.
- \* 有BRCA基因有害突變的婦女，乳腺癌和卵巢癌的風險增加。
  - Only 5-10% of all breast cancer patients have the BRCA gene mutation
  - 但所有的乳腺癌患者中，只有5-10%有BRCA基因突變
- \* Most women with breast cancer do not have a BRCA gene mutation and therefore are not at increased risk of ovarian cancer
- \* 大多數患乳腺癌的婦女，沒有BRCA基因突變，因此，卵巢癌的風險不會增加
- \* You should continue to see your gynecologist regularly for a Pap smear (cervical cancer screening)
- \* 你應該繼續見你的婦科醫生，定期作子宮頸抹片檢查（子宮頸癌篩檢）
- \* Tamoxifen increases the risk of endometrial cancer
- \* 他莫昔芬會增加子宮內膜癌的風險
- \* You should report any vaginal bleeding to your doctor
- \* 如果有任何陰道出血，你應該告訴你的醫生

# How often should you have your bone density checked with a DEXA scan? 你應該多久作一次骨骼密度DEXA掃描檢查？

- \* Aromatase inhibitors (AI) lead to decreased bone density and increased risk for osteoporosis  
芳香化酶抑製劑 ( AI ) 導致骨密度降低，骨質疏鬆症的風險增加
  - Anastrozole (Arimidex), Letrozole (Femara), Exemestane (Aromasin)
- \* All patients on an AI should take calcium/vitamin D  
所有服 ( AI ) 者應服鈣/維生素D
- \* Bisphosphonates may help stabilize bone density  
雙磷酸鹽類藥物可能有助於穩定骨密度
  - Ongoing studies are evaluating role of bisphosphonates at initiation of AI 正在進行的研究在評估雙磷酸鹽類藥物 对AI開始的作用
- \* **You should have a DEXA scan within 3 months of starting an AI, and then as needed** 在開始AI 3個月內，應做一次DEXA掃描，隨後根據需要
  - If baseline DEXA normal, then have a DEXA every year or every 2 years
  - 如果基線骨密度正常，每年或每2年做一次DEXA掃描
  - If baseline DEXA shows osteopenia, then have a DEXA scan every year
  - 如果基線DEXA顯示骨質疏鬆，每年做一次DEXA掃描
  - If baseline DEXA shows osteoporosis, then have a DEXA scan every year or consider Tamoxifen 如果基線DEXA 顯示骨質疏鬆，每年做一次DEXA掃描，或考慮改服他莫昔芬

# You do NOT regularly need:

## 什麼是你不經常需要的：

- \* Routine blood tests (CBC, liver, kidney function) 常規血液檢查 ( CBC , 肝 , 腎功能 )
- \* Chest X-ray胸部透視
- \* Bone scan骨掃描
- \* Liver ultrasound肝臟超聲波檢查
- \* CT scan電腦斷層掃描
- \* Breast MRI乳腺MRI
- \* PET scanPET掃描
- \* Breast cancer tumor markers, such as CA 15-3, CA 27.29, and CEA 乳腺癌腫瘤標誌 如CA 15-3, CA 27.29, CEA等

→ These tests are not currently recommended for regular follow-up care because they have not been shown to lengthen the life of a person with breast cancer

→ 目前沒有建議定期作這些後續檢驗，因為他們還沒有被證實可延長乳腺癌病人的壽命

Recommended follow-up	Frequency
Doctor's visit	<ul style="list-style-type: none"> <li>• Every 3-6 months for 1<sup>st</sup> three years</li> <li>• Every 6-12 months for 4<sup>th</sup> and 5<sup>th</sup> year</li> <li>• After 5<sup>th</sup> year, annually</li> </ul>
Mammogram	<ul style="list-style-type: none"> <li>• If lumpectomy, then new baseline MMG 4-6 months after you finish radiation on cancer side, then annual bilateral MMG.</li> <li>• If mastectomy, MMG on opposite breast one year after your diagnosis, then annually.</li> </ul>
Screening ultrasound	Not recommended at this time
Self breast examination	<ul style="list-style-type: none"> <li>• Once a month</li> <li>- Report new lumps, skin changes, nipple discharge</li> </ul>
Pelvic exam	<ul style="list-style-type: none"> <li>• Annually</li> <li>- If you're taking Tamoxifen, report vaginal spotting/ bleeding/ discharge</li> </ul>
Bone density (DEXA) scan	<ul style="list-style-type: none"> <li>• Annually or every other year</li> <li>- If you're taking Aromtase Inhibitor (Arimidex, Femara, Aromasin)</li> </ul>

後續檢查建議	Frequency 頻率
見你的的醫生	<ul style="list-style-type: none"> <li>•第1-3年： 每3-6个月一次</li> <li>•第4-5年： 每6-12个月一次</li> <li>•5年以後： 每年一次</li> </ul>
Mammogram 乳房X光檢查	<ul style="list-style-type: none"> <li>•<b>乳房腫瘤切除術</b> <ul style="list-style-type: none"> <li>•完成對癌症側乳房電療後4-6個月，作新的基準X光檢查， 然後每年對雙側乳房X光檢查</li> </ul> </li> <li>•<b>乳房切除</b> <ul style="list-style-type: none"> <li>•診斷後一年對另側乳房X光檢查， 然後每年一次。</li> </ul> </li> </ul>
Screening ultrasound 乳房超聲波檢查	据现在的醫學研究， 沒有推薦
Self breast examination 自我檢查乳房	<ul style="list-style-type: none"> <li>• 每月一次</li> <li>-告訴醫生： 新的腫塊， 皮膚改變， 乳頭溢液</li> </ul>
Pelvic exam 骨盆檢查	<ul style="list-style-type: none"> <li>• 每年一次</li> <li>- 如果你正在服用他莫昔芬， 告訴醫生陰道點滴出血/ 出血/ 排液</li> </ul>
Bone density (DEXA) scan 骨骼密度DEXA掃描檢查	<ul style="list-style-type: none"> <li>• 每年， 或兩年一次</li> <li>- 服芳香化酶抑制劑（AI）者 (Arimidex, Femara, Aromasin)</li> </ul>



# Thank you

