

Community Page

BREAST CANCER AWARENESS

Breast Cancer Are You At Risk?

October is National Breast Cancer Awareness Month. Every woman should be aware of certain risk factors for developing breast cancer which include growing older, family history of breast cancer, early menstruation age and late-onset menopause. You can control your risk rate by limiting alcohol intake not to exceed one drink per day, maintaining a healthy weight, exercising regularly and undergoing regular screenings like mammograms and breast exams.

Expert talks about Breast Cancer Awareness

DEAR ABBY: I need your help. October is National Breast Cancer Awareness Month. We know the most effective method of early detection is mammography screening. However, the most recent survey of American women has shown that more than 40 percent had not had a mammogram in the past year, that many women fail to get regular mammograms, and that only one-third of women without health insurance were able to get a mammogram the previous year.

This issue resonates deeply with me for reasons that go beyond my being president of the American Cancer Society and a surgeon who meets and treats women with cancer every day. I, too, am a breast cancer survivor. It breaks my heart knowing there are women who should be getting mammograms, but aren't.

Mammograms save lives.

For many women, the decision about whether to get a mammogram is out of their hands. They simply can't afford it. The American Cancer Society feels strongly that mammograms are not a luxury but a necessity, and all women deserve one every year.

We have spent decades in the fight to reduce cancer disparities by working to ensure that a greater proportion of Americans have access to screening and treatment. The society has been a longtime supporter of the CDC's National Breast and Cervical Cancer Early Detection Program, which provides access to high-quality breast cancer screenings and treatment to uninsured or underinsured women, with an emphasis on women between the ages of 50-64.

While the program has done ex-

traordinary work to save the lives of women from breast and cervical cancer, it serves only 20 percent of eligible women due to lack of funds. And if that is not sad enough, its limited reach could be further compromised by proposals out of the White House and Congress to decrease funding.

I hope that you and your readers will agree that income level should not determine whether someone survives breast cancer. For more information on the program, or to find a local program to determine their eligibility, your readers should call 1-800-ACS-2345.

— CAROLYN RUNOWICZ, M.D., AMERICAN CANCER SOCIETY

DEAR DR. RUNOWICZ AND READERS: Rather than cutting a valuable program that serves only one out of five women, shouldn't we

be asking how the program can be extended to reach the other four who need help? A lifesaving program such as this one is too important to cut, because with a modest investment, more lives could be saved through it.

The American Cancer Society is asking Congress to support this program and give it greater flexibility to reach the women in greatest need and increase the funding so it can help more of them.

Because this is an election year, I urge concerned women to contact their legislators in Washington, D.C., and tell them how you feel about this important program. If you don't know who your representatives are, go to www.house.gov and enter your ZIP code. In simple terms, the squeaky wheel gets the grease, so speak up and be heard.

Symptoms

Often there are no obvious signs of breast cancer that you can see or feel. If there are noticeable physical signs, the more common ones include a lump, an area of thickening, a dimple in the breast, or nipple discharge. Less common signs include breast swelling and redness or an enlarged underarm lymph node.

But even if you have one or more of these signs, this still doesn't mean you have breast cancer. Remember that most breast lumps turn out to be benign, or not cancerous.

Treatment

There are two broad categories of breast cancer treatment. Local therapy treats only a local area, such as the breast and lymph nodes around the breast. Surgery and radiation are considered to be local therapy treatments. Systemic therapy goes beyond a local region to treat the whole body or system. Systemic therapy includes chemotherapy and hormone therapy.

Because every situation is unique, treatment options may vary. However, treatment of metastatic breast cancer generally involves a systemic therapy such as chemotherapy. Other treatment options may include additional surgery, radiation, hormonal therapy, or the use of other drugs that may provide symptom relief. The therapy you receive to fight your disease depends on your physical condition, progression of the disease, options available to you, and your own choice.

Getting tested regularly improves your chances for early detection. The screening tests described below can help find cancer early:

* Breast self exam—Can aid in detection of early tumors, particularly those that develop between annual mammograms and clinical breast exams. Monthly self-exams help you become familiar with how your breasts normally look and feel. This can help you recognize changes, such as thickening, lumps, spontaneous nipple discharge, dimpling or puckering.

* Clinical breast exam—Physical examinations done by physicians, nurse practitioners and other trained medical staff, who check the appearance and feel of the breasts and underarm for changes. The American Cancer Society recommends that women in their 20s and 30s should have a clinical

breast exam as part of a routine health exam at least once every three years. Women over the age of 40 should have a yearly clinical breast exam.

* Mammogram—Uses x-rays to create an image of the breast, and may detect tumors that can't be felt. A mammogram is generally considered to be the best screening method available.

* Ultrasound—Uses high-frequency sound waves to produce images on a viewing screen. Ultrasound is the best way to find out if an abnormality discovered through physical exam or mammography is solid (a benign fibroadenoma) or fluid-filled (a benign cyst). An ultrasound does not indicate whether a solid lump is cancerous.

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