



BREAST CANCER

Understand, Prevent, Care



Fondation
cancer du sein
du Québec

ON THE AGENDA

- **Breast cancer**
 - Statistics and definitions
 - Risk factors
- **Good Practices in Breast Health**
 - Early detection
- **Our free support services**
 -

- **BREAST CANCER**



- **Statistics and definition**



Key stats

Breast cancer is the most common cancer in women.



1 in 8 women
in Canada will develop cancer
of the breast during its lifetime



More than 8,580 women
were diagnosed with breast cancer this
year in Quebec in 2023.
(8320 in 2022, 8045 in 2021)



1 in 36 women
will die as a result of the
disease

89%

**Women will live at least 5 years
after a breast cancer diagnosis**
(80% in men)



**breast cancer
affect men**

AGE AT DIAGNOSIS

Women

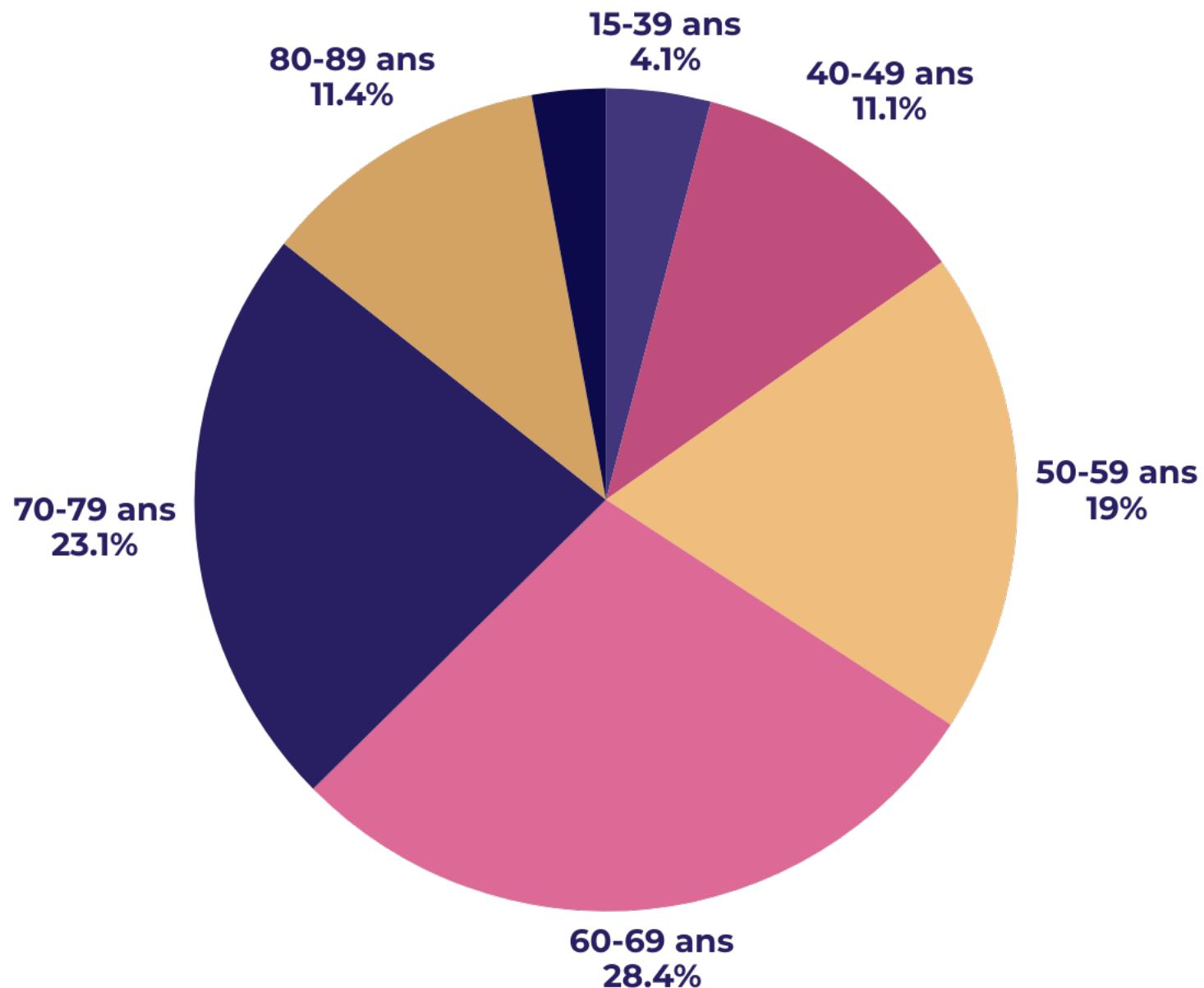
Most at-risk factors

1. 65-69
2. 60-64
3. 70-74

Men

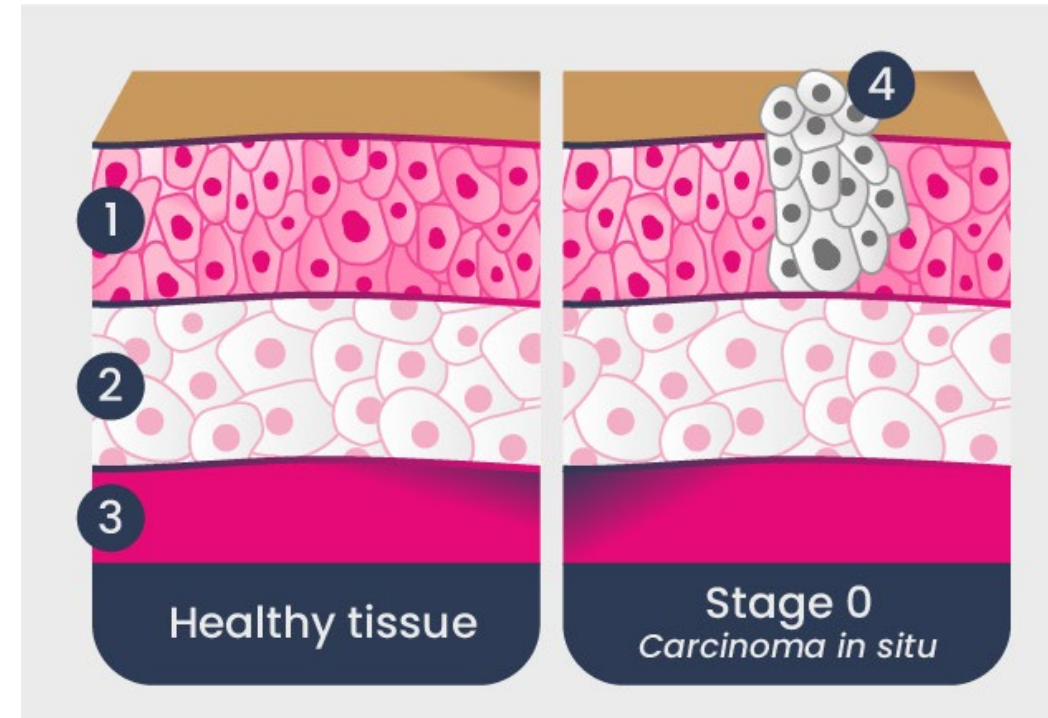
Most at-risk factors

1. 65-69
2. 70-74
3. 75-79



WHAT IS BREAST CANCER?

- It is the **uncontrollable growth of abnormal cells** which cause the formation of a **mass** called **cancerous tumour**.
- Our cells have **several mechanisms to prevent the development of cancer**. However, cancerous cells are able to **bypass** and/or **inactivate them**.
- In most cases, breast cancer develops **for several months** and sometimes even **several years** before diagnosis.

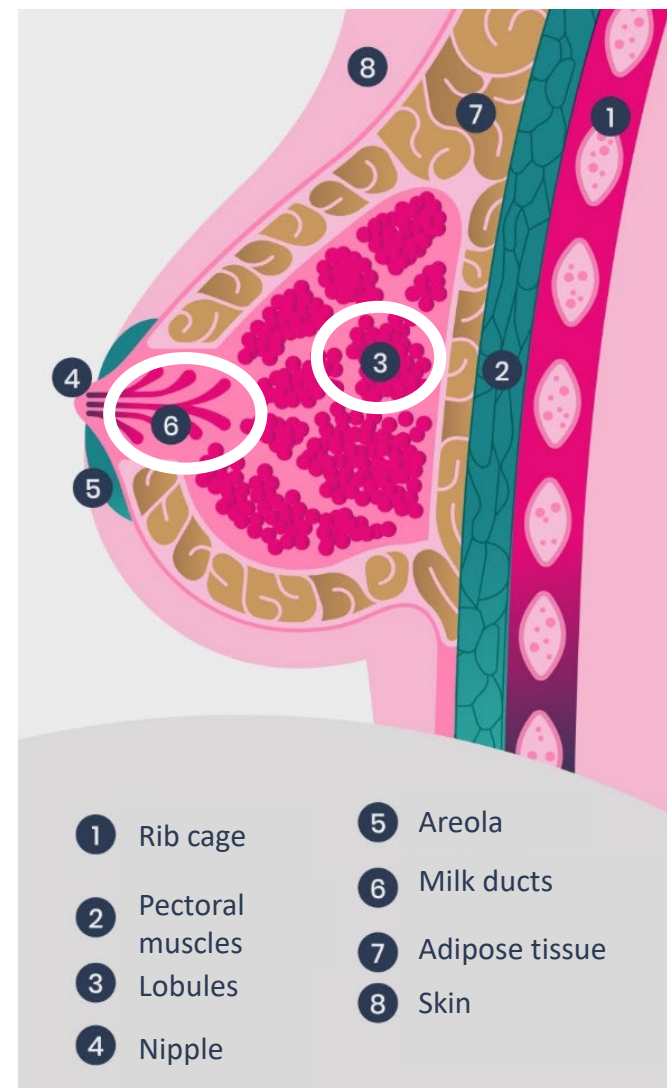


- 1 Affected tissue
- 2 Neighbouring tissue
- 3 Blood vessel
- 4 Tumour

Where does breast cancer develop?

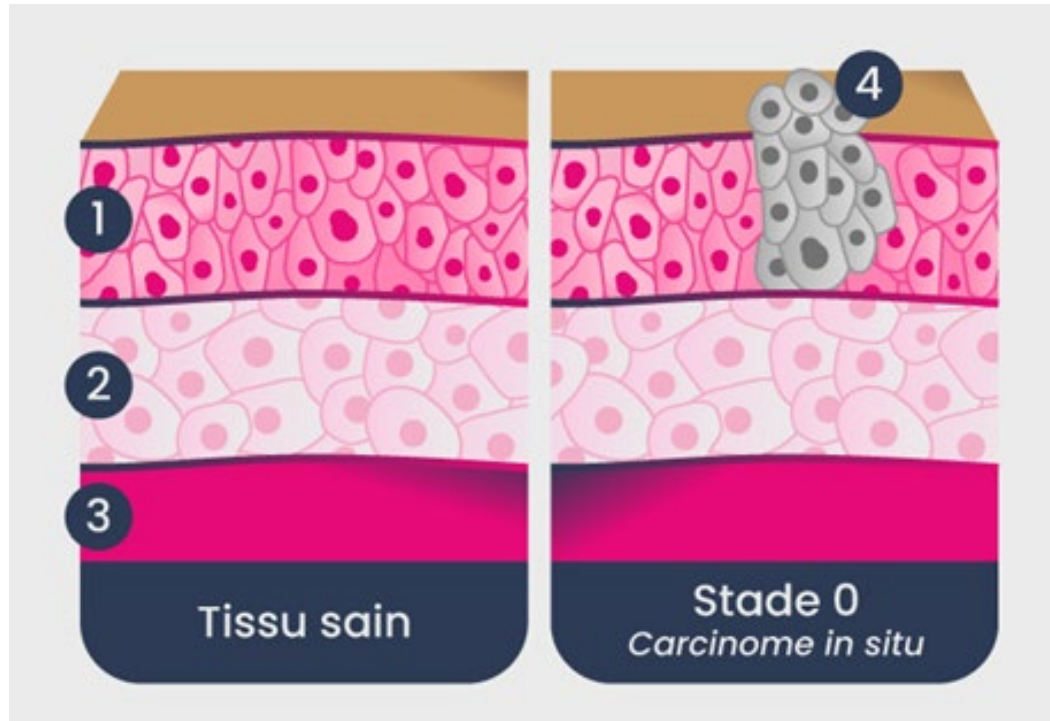
LOCALIZATION	PREVALENCE
Milk ducts (6)	85%
Mammary lobules (structural units/glands of the breast – 3)	14%
Others	1%

Cancerous cells can remain in the breast. They can also spread in other organs as metastasis.



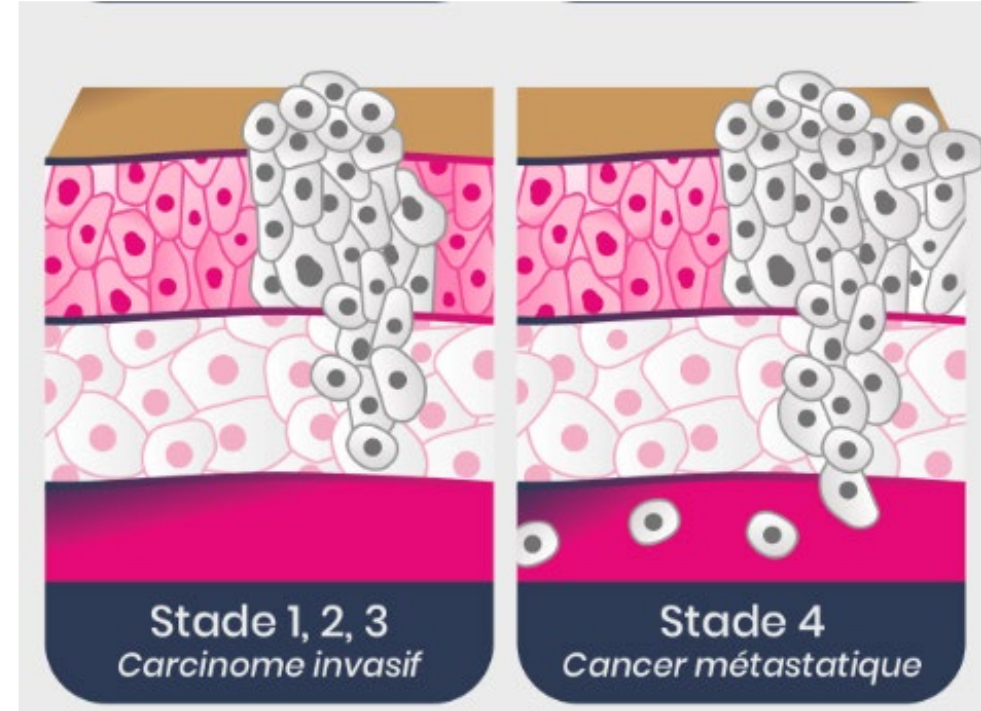
Breast anatomy

What are the stages?



- 1 Tissu atteint
- 2 Tissu voisin
- 3 Vaisseau sanguin
- 4 Tumeur

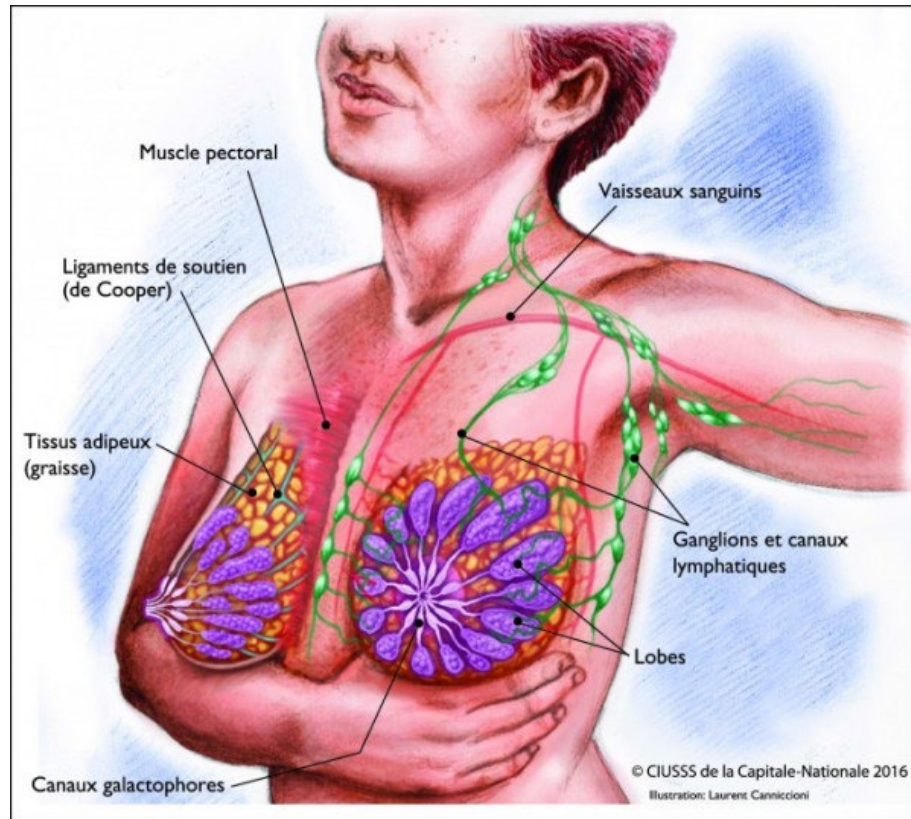
In-situ: Cancer cells are located only in the membrane in which they originated (duct or lobules)



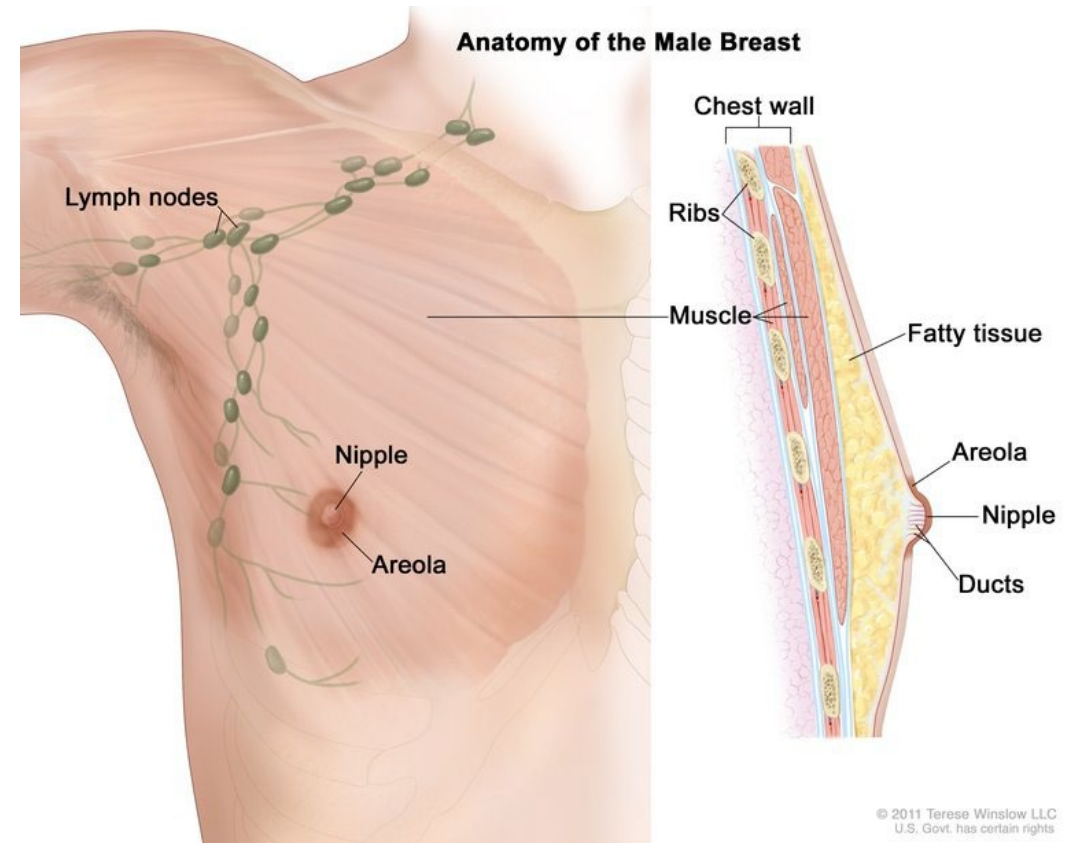
Infiltrative: Cancer cells have left their original tissue and have moved into lymph nodes and possibly nearby tissues, such as muscles or skin.

Metastatic: Cells can move and use the blood or lymphatic route to spread and attach to other organs

Anatomy of the Chest



[PQDCS](#) (2023)



National Cancer Institute (2012).

Most breast cancers develop in the milk ducts. (85% for women and the majority of cases for men)

- **BREAST CANCER**



- Risk factors**



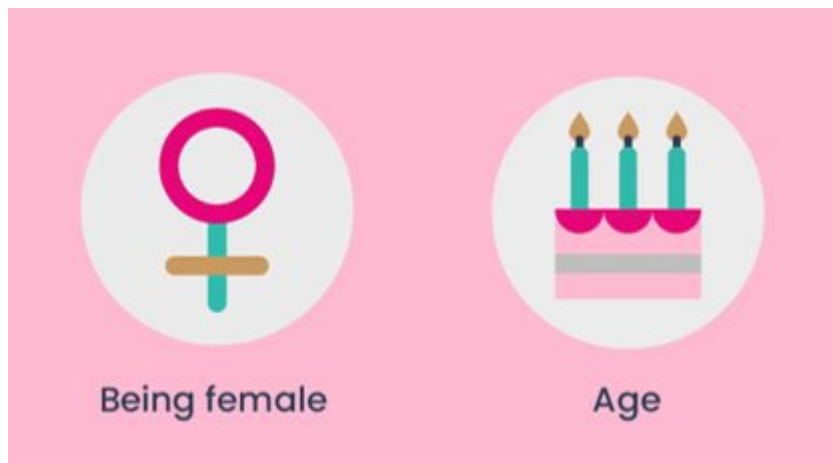
RISK FACTORS

Am I at risk?

Everybody is at risk, but some factors can increase **the probability of developing breast cancer** throughout the life = **risk factor**.

- Breast cancer is **multifactorial**.
- Some factors are **out of our control**.
- Some factors depend on **our choices and our behavior**.
- Some people may develop breast cancer even if they have no known risk factors.
- They are **known** risk factors and *possible* risk factors.

RISK FACTORS ASSOCIATED WITH PERSONAL CHARACTERISTICS

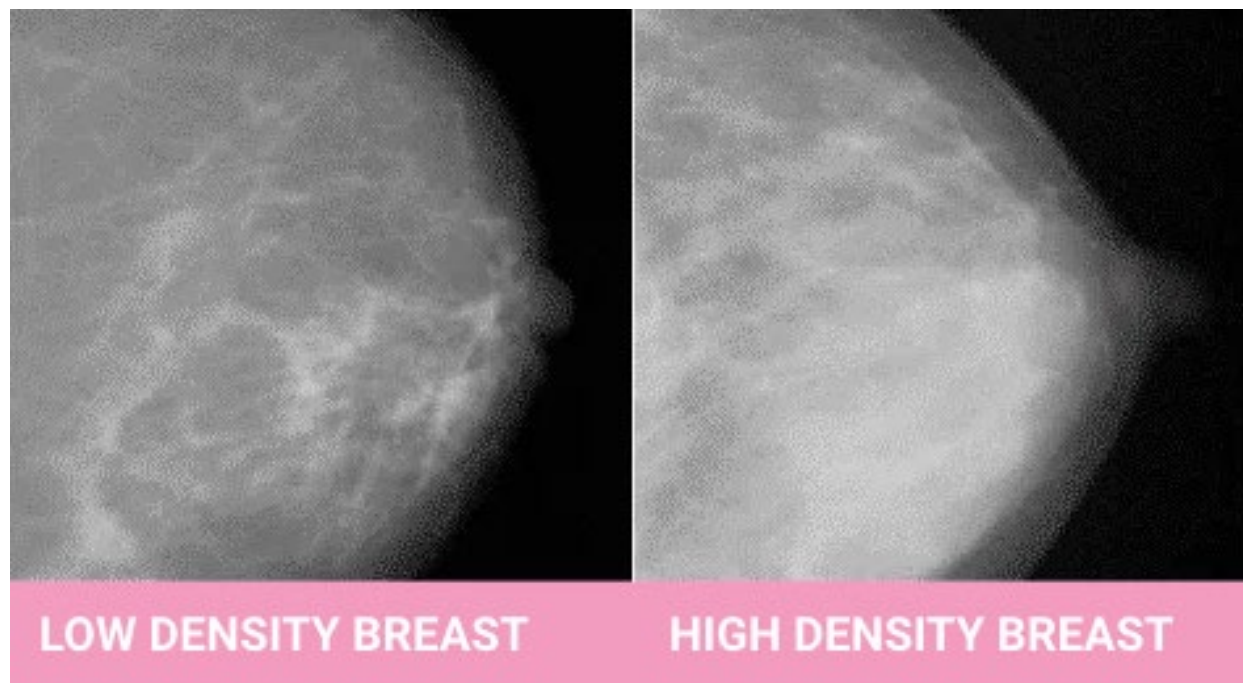


- **Being born a woman (99% of cases)**
- **Advancing in age (60-69 years).**

RISK FACTORS ASSOCIATED WITH PERSONAL CHARACTERISTICS



- **Having high breast density.**



Very dense breasts can make it more difficult to detect breast cancer and are associated with a slightly higher risk of developing the disease.

RISK FACTORS RELATED TO HEREDITY



- **Having a family member who has been affected**

The risk of developing breast cancer **increases if one or more family members, on the biological mother's or father's side**, have had breast or ovarian cancer.

This risk is greater if:

- The cancer appeared before menopause
- There have also been ovarian, pancreatic or prostate cancers in the family
- Several family members have had cancer.

RISK FACTORS RELATED TO HEREDITY

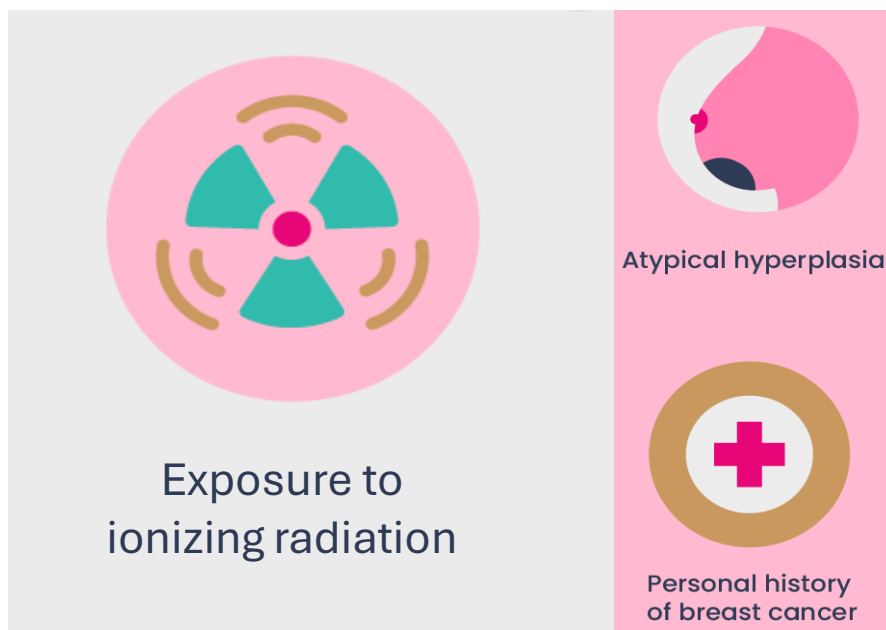


Genetic mutation

- Having a **genetic mutation** associated with breast cancer (BRCA1, BRCA2, etc.).
- A **genetic predisposition** to breast cancer is identified in about 10% of cases.
- A genetic predisposition can be transmitted on both the **maternal and paternal sides**.
- Some groups are at higher risk of aggressive forms (triple-negative breast cancer).

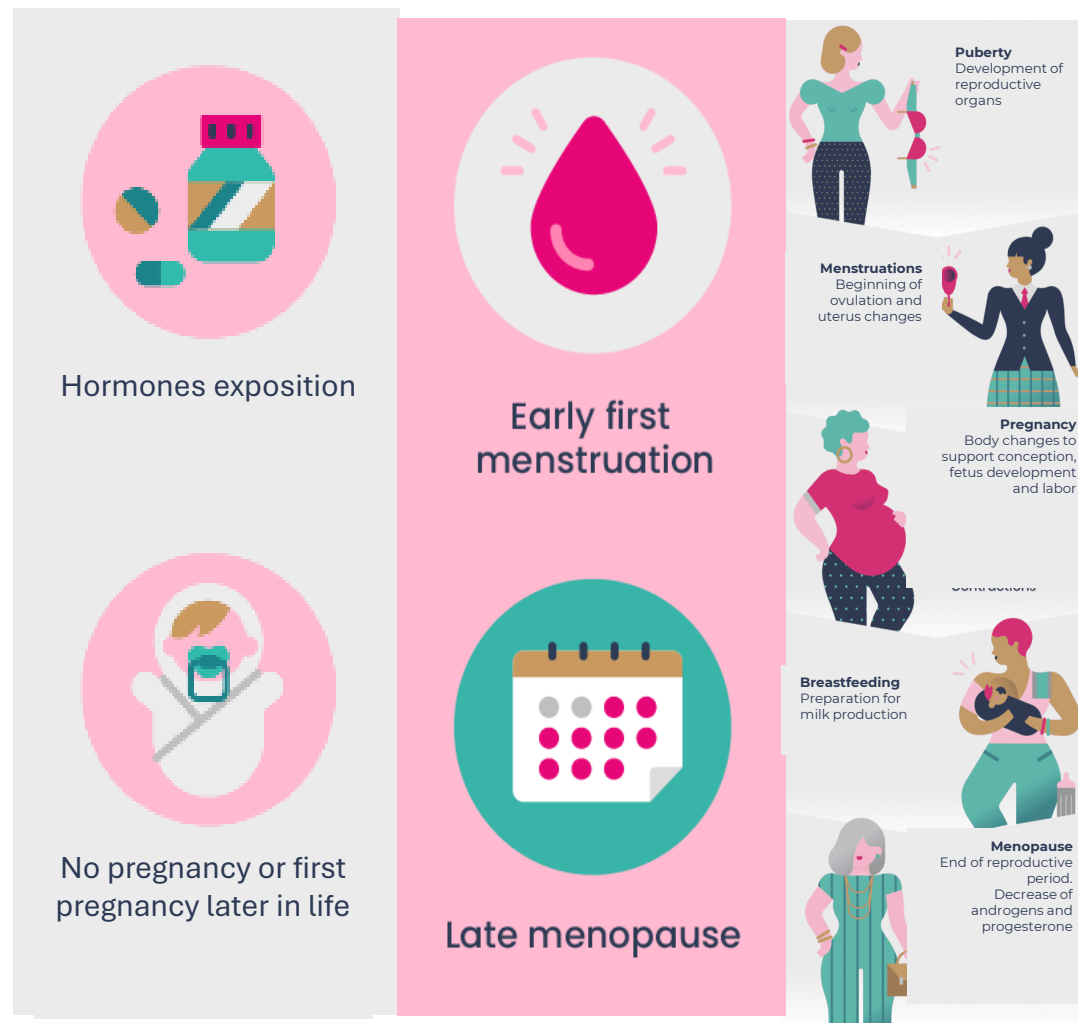


RISK FACTORS RELATED TO MEDICAL HISTORY



- Receiving **radiation for treatments** in the chest, neck and armpit area (at higher risk if before 15 years of age).
- Having **atypical hyperplasia**.
- Having **already been diagnosed with breast cancer**.

HORMONAL AND REPRODUCTIVE RISK FACTORS



- **Prolonged use of estrogen and progesterone**
 - Treatment to reduce the effects of menopause
 - Hormonal contraceptives
 - Gender-affirming therapy
- First late-term pregnancy (after age 30) or no full-term pregnancy.
- **Early menstruation** (before the age of 12).
- **Late menopause** (after age 55).

MODIFIABLE RISK FACTORS



- Consuming **alcohol**.
- Weight gain post-menopause.
- Being **sedentary**.
- Being **physically inactive**.
- **Smoking** or being exposed to second-hand smoke.



Acting on these lifestyle habits can help prevent breast cancer

Mini-Quiz

The use of antiperspirants causes breast cancer.

Answer: **FALSE**. No link has been demonstrated between the use of antiperspirants and breast cancer.

Sugar increases the risk of developing breast cancer.

Answer: **FALSE**. No studies have indicated a direct causal relationship between sugar consumption and breast cancer incidence. Although cancer cells require glucose, this is the case for all cells in the human body.

I can reduce my risk of breast cancer by:

- a. Exercising
- b. Eating Healthy
- c. Limiting sitting time
- d. Limiting alcohol
- e. All of the above



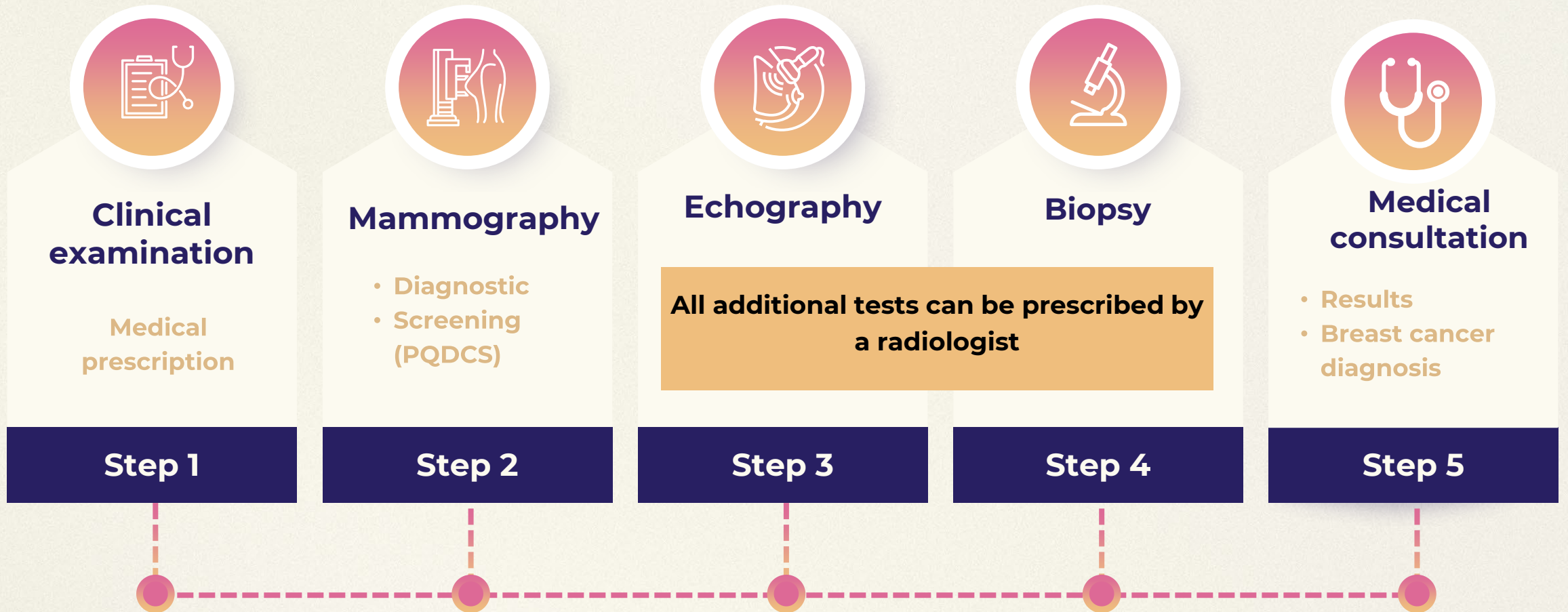


BREAST CANCER

Diagnostic Process



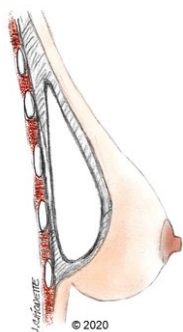
DIAGNOSTIC PROCESS



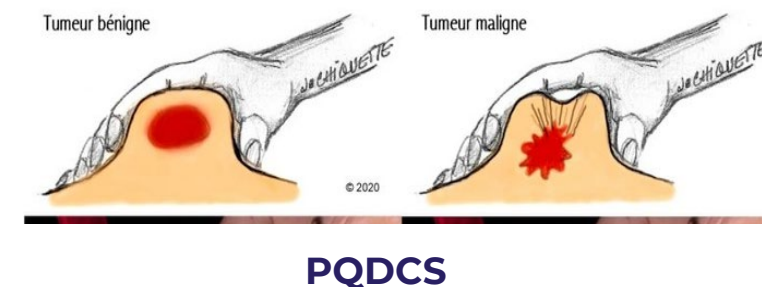
STEP 1. Clinical examination

The health professional will perform:

- Inspection for **visual signs** (volume, anatomy, etc.)
- **Palpation** (lying down, sitting)
- Examination of the **lymph nodes** (collarbone and armpit)



- Possibility of a clinical examination even with a prosthesis
- May have a female witness if the professional is male



STEP 2. MAMMOGRAPHY

- **Low-dose X-rays**, which provide detailed images of breast tissue.

Diagnostic

- If you have any possible signs
 - With a prescription (everyone).

Screening

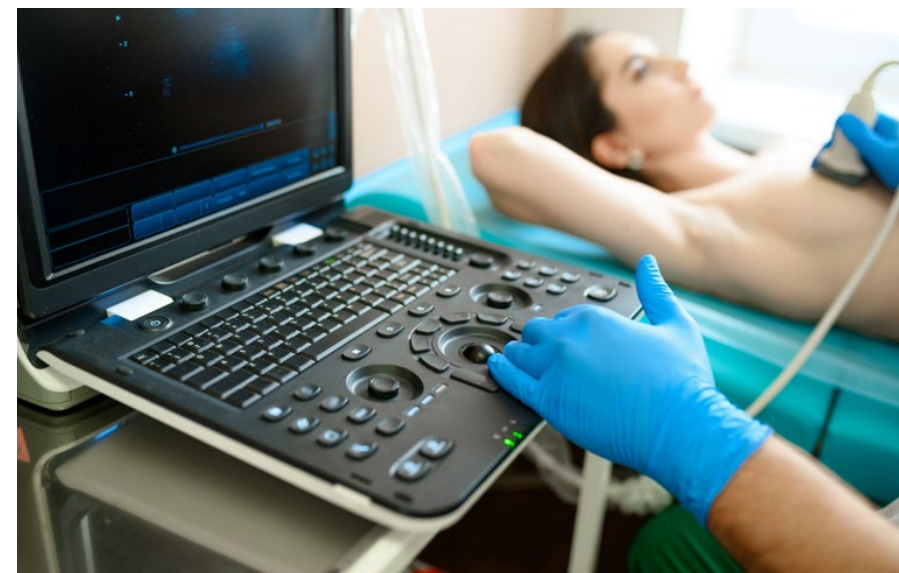
- Without any possible signs
 - With recurrent prescription: 30 years and older, at risk.
 - PQDCS letter



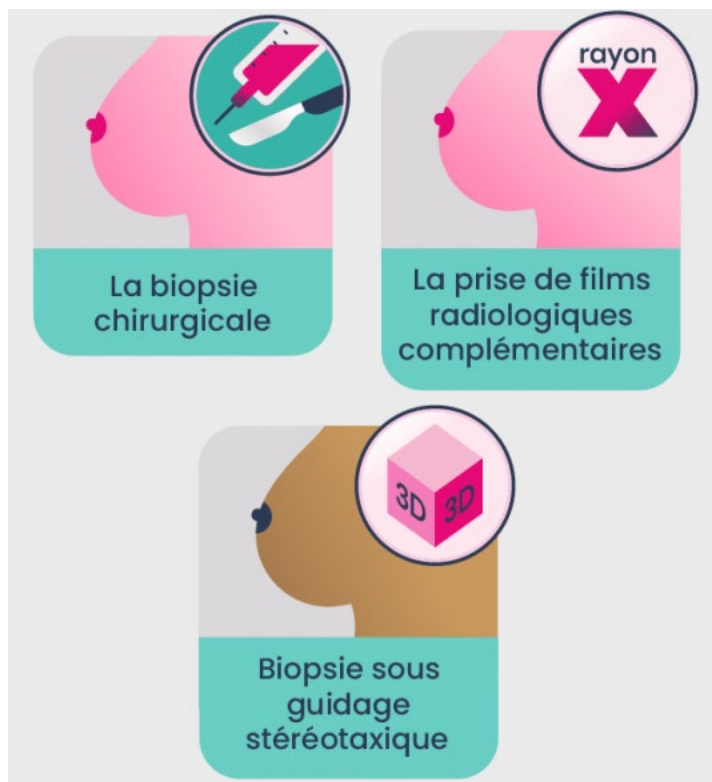
STEP 3. ULTRASOUND

A doctor may recommend this test to:

- **Examine a lump or abnormality**, in some cases **before** the mammogram;
- Examine a lump or abnormality detected by mammogram to :
 - **Determine if a mass is solid (tumor) or liquid (cyst);**
 - Properly identify the area of the breast where the abnormality is located in order to do a biopsy.



STEP 4. BIOPSY



Only a breast biopsy can confirm or rule out the diagnosis of breast cancer beyond any doubt.

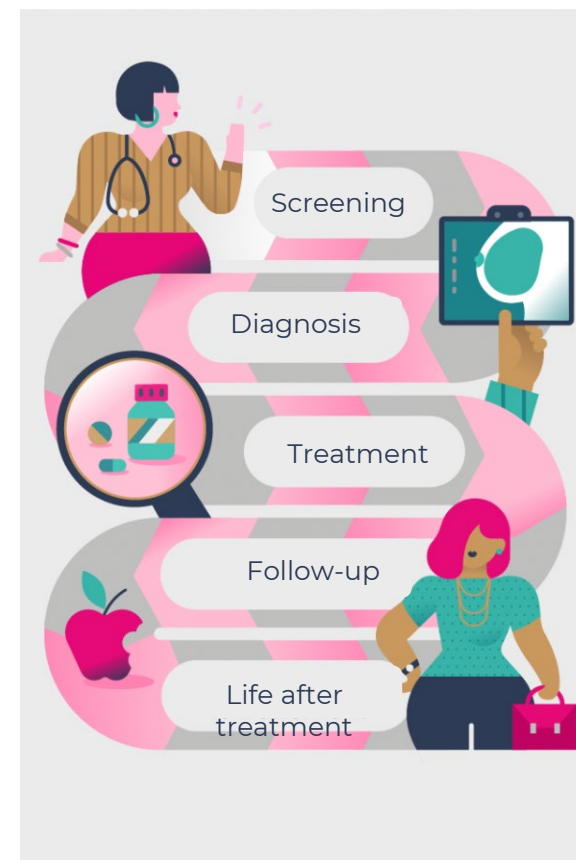
Removal of cells or tissues from the breast(s) or lymph nodes and examination of these in the laboratory.

Confirms the presence or absence of cancer cells.

PROMOTE EARLY DETECTION

We want to detect breast cancer as early as possible:

- Breast cancer detected early (at an early stage) has a **better chance of recovery;**
- Breast cancers diagnosed at an early stage may require **less aggressive treatments.**



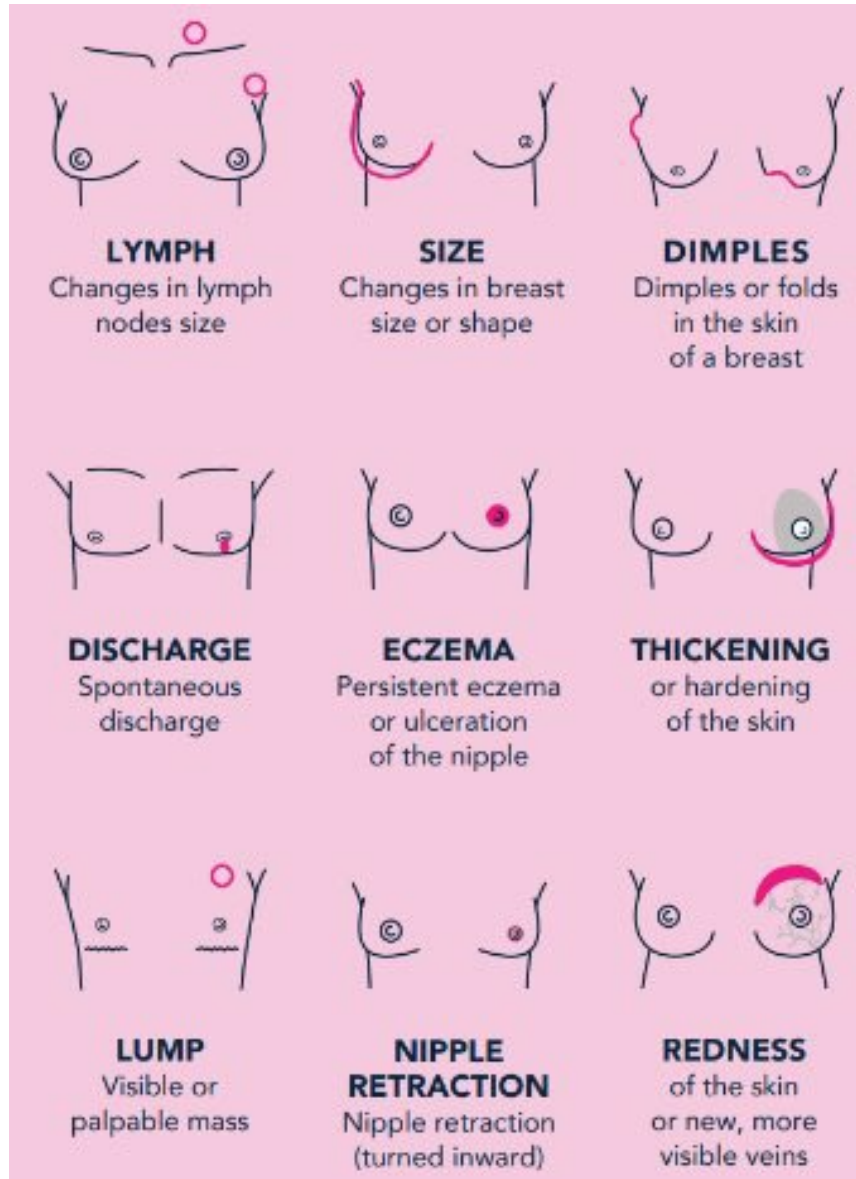


BREAST CANCER

Early detection



How to observe your breasts?



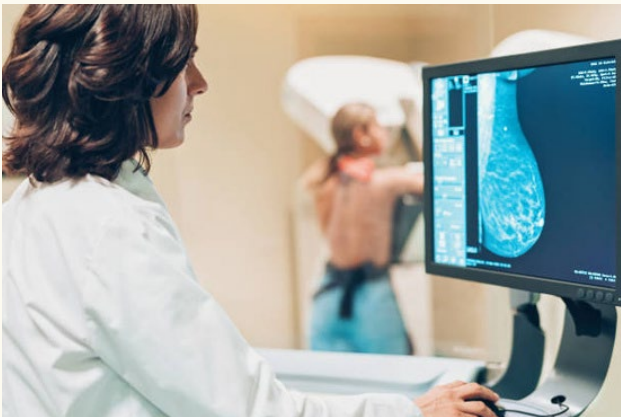
- Observe your chest for usual and persistent signs
- Touching the chest, collarbone and armpit
- Most of the masses are not tumors (in 80% of cases)

In case of doubts,

- **Consult your family doctor OR**
- **Make an appointment with 8-1-1 option 3**

Quebec Cancer Screening Program Breast

Letter in the mail as soon as the person is eligible



01

50-74 ans

50-69 years old,
changed in January
2024.

02

**Registered as a woman
with the RAMQ**

03

**Mammogram every
2 years**

04

Restricted

No men.
RAMQ mandatory.
Mammography only
Not based on risk factors
Non-binary people (X)

THE QUEBEC BREAST CANCER FOUNDATION



Fondation
cancer du sein
du Québec

Support Services

avant



- Peer Helpline

pendant



- Our services offered
- Maison Rose
- Emotional support

après



- Our services offered
- Return to work
- Emotional support

LIFE AFTER BREAST CANCER

Even in times of remission, there could be challenges in terms of:

- Physical, social, emotional rehabilitation
- Cognitive impairment (brain fog)
- Mental health (anxiety, fear of recurrence, depression)
- Return to the world of work
- Self-esteem and body image
- Etc.



Thank you !

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