

WEEKLY EPIDEMIOLOGICAL REPORT

A publication of the Epidemiology Unit Ministry of Health

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Breast Cancer (Part IV)

Vol. 41 No. 47

15th – 21st November 2014

This is the last part of the series of four articles on Brest Cancer

What Can I Do to Reduce My Risk of Breast Cancer?

Many factors can influence your breast cancer risk, and most women who develop breast cancer do not have any known risk factors or a history of the disease in their families. However, you can help lower your risk of breast cancer in the following ways

Keep a healthy weight

Exercise regularly

Get enough sleep

Don't drink alcohol, or limit alcoholic drinks to no more than one per day.

Avoid exposure to chemicals that can cause cancer (carcinogens).

Try to reduce your exposure to radiation during medical tests like mammograms, X-rays, CT scans, and PET scans.

If you are taking, or have been told to take, hormone replacement therapy or oral contraceptives (birth control pills), ask your doctor about the risks and find out if it is right for you.

Breastfeed your babies, if possible.

Although breast cancer screening cannot prevent breast cancer, it can help find breast cancer early, when it is easier to treat. Talk to your doctor about which breast cancer screening tests are right for you, and when you should have them.

If you have a family history of breast cancer or inherited changes in your BRCA1 and BRCA2

genes, you may have a higher breast cancer risk. Talk to your doctor about these ways of reducing your risk—

 Antioestrogens or other medicines that block or decrease estrogen in your body.

Surgery to reduce your risk of breast cancer-

- Prophylactic (preventive) mastectomy (removal of breast tissue).
- Prophylactic (preventive) salpingooophorectomy (removal of the ovaries and fallopian tubes).

It is important that you know your family history and talk to your doctor about screening and other ways you can lower your risk.

Treatment Options Overview

Surgery Sentinel lymph node biopsy followed by surgery Radiation therapy Chemotherapy Hormone therapy Targeted therapy

Coping practically with breast cancer

As well as coping with the fear and anxiety that a diagnosis of breast cancer brings, you may also have to work out how to manage practically. There may be money matters to sort out. You may need information about financial support, such as benefits, sick pay and grants.

Who do you tell that you have cancer? And how do you find the words? You may also have children to think about. We have information about talking to people about your cancer and how and what to tell children.

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Remember that you don't have to sort everything out at once. It may take some time to deal with each issue. Do ask for help if you need it though. Your doctor or specialist nurse will know who you can contact to get some help. They can put you in touch with professionals who are specially trained in supporting people with cancer. These people are there to help and want you to feel that you have support. So use them if you feel you need to.

You may need to have access to support staff, such as a breast care nurse or dietician. Social workers can help you with information about your entitlement to sick pay and benefits. If you live alone, a social worker may be able to help by organizing convalescence when you first go out of hospital.

What to ask your doctor about living with breast cancer

- How long will it take for me to get back to normal life?
- Is there any counseling available to help me with the emotional side of breast cancer?
- Are there medicines to help reduce menopausal symptoms, such as hot flushes?
- Will the medicines cause side effects?
- Is there any practical help I can get?
- How can I reduce tiredness?
- Would complementary therapies help me to cope with depression, tiredness or anxiety?
- Is there anyone who can help me with financial issues, including claiming benefits?
- What kind of birth control is best for me?
- How well does this type of birth control prevent pregnancy?
- What problems might I have if I get pregnant before my treatment is finished?
- How long after my treatment should I wait before trying to get pregnant?
- Are there health and other risks of being pregnant once the breast cancer treatment ends?
- How much exercise can I do?

Secondary breast cancer

Secondary breast cancer is breast cancer that has spread to another part of the body. It may have spread when it is diagnosed, or have come back (recurred) after earlier treatment for primary breast cancer.

Breast cancer research & Trials

Tests in patients are called clinical trials.

15th – 21st November 2014

There are ongoing researches regarding diagnosis, causes, treatment and prevention of breast cancer. This is so that;

We can be sure they work

We can be sure they work better than the treatments available at the moment

We know they are safe.

Sources

Breast Cancer-available at <u>http://www.cdc.gcancer/ov/breast/</u> basic info/index.htm

Breast Cancer-available at <u>http://www.cancer.org/cancer/breastcancer/</u> <u>detailedguide/breast-cancer-key-statistics</u>

Breast Cancer Research- available at <u>http://breast-cancer-</u> research.com/

Table 1 : Water Quality Surveillance Number of microbiological water samples - October/ 2014 MOH areas No: Expected * District No: Received Colombo 12 72 48 Gampaha 15 90 NR Kalutara 12 72 27 2 Kalutara NIHS 12 NR NR Kandy 23 138 Matale 12 72 NR Nuwara Eliya 13 78 NR Galle 19 114 NR Matara 17 102 9 Hambantota 12 72 NR Jaffna 13 11 66 Kilinochchi 4 0 24 5 9 Manner 30 Vavuniya 4 24 10 Mullatvu 4 24 4 Batticaloa 14 84 1 7 42 0 Ampara Trincomalee 11 66 NR 23 138 118 Kurunegala Puttalam 9 54 55 Anuradhapura 19 114 65 Polonnaruwa 7 42 27 Badulla 15 90 NR Moneragala 11 87 66 NR Rathnapura 18 108 Kegalle 11 66 NR 13 78 0 Kalmunai * No of samples expected (6 / MOH area / Month) NR = Return not received

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Table 1: Selected notifiable diseases reported by Medical Officers of Health 08th - 14th Nov 2014 (46th Week)																													
Q	C**	25	53	23	4	38	23	10	17	0	0	75	20	25	20	14	0	33	1	15	16	57	12	0	28	27	23	19	
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Dysentery	В	139	132	150	84	64	257	115	50	93	775	110	58	80	72	325	78	09	143	69	211	52	188	87	212	68	121	3823	ases (WR rns receive
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Dengue Fever	В	12452	7008	2354	1733	464	285	1025	586	639	1231	56	201	116	100	727	147	548	2003	671	492	476	778	271	2644	1498	246	38751	s of Communicable Diseases (WRCD). -1=Timeliness refers to returns received on or before 14 th November , 2014 Total num
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RDHS Division		Colombo	Gampaha	Kalutara	Kandy	Matale	NuwaraEliya	Galle	Hambantota	Matara	Jaffna	Kilinochchi	Mannar	Vavuniya	Mullaitivu	Batticaloa	Ampara	Trincomalee	Kurunegala	Puttalam	Anuradhapura	Polonnaruwa	Badulla	Monaragala	Ratnapura	Kegalle	Kalmune	SRILANKA	Source: Weekly Returns of Communicable Diseases (WRCD). -T=Timeliness refers to returns received on

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Table 2: Vaccine-Preventable Diseases & AFP

15th – 21st November 2014

08 th - 14 th Nov 2014 (46 th We

Disease	W C S N E NW NC U Sab W C S N E NW NC U Sab week in 2014		Number of cases during same week in 2013	Total number of cases to date in 2014	Total number of cases to date in 2013	Difference between the number of cases to date in 2013& 2014								
AFP*	00	01	00	00	00	00	00	00	01	02	01	74	91	-18.7%
Diphtheria	00	00	00	00	00	00	00	00	00	00	-	00	-	%
Mumps	00	02	03	00	00	00	03	03	00	11	22	604	1376	-56.1%
Measles	10	03	09	00	00	08	02	01	01	34	60	2968	3631	-18.3%
Rubella	00	00	00	00	00	00	00	00	00	00	00	17	27	-37.0%
CRS**	00	00	00	00	00	00	00	00	00	00	00	04	06	-33.3%
Tetanus	00	00	00	00	01	00	00	00	00	01	00	13	22	-41.1%
Neonatal Tetanus	00	00	00	00	00	00	00	00	00	00	-	00	-	%
Japanese Encephalitis	00	00	00	00	00	00	00	00	00	00	00	22	68	-67.6%
Whooping Cough	00	00	01	01	00	00	00	00	00	02	00	71	82	-13.4%
Tuberculosis	49	25	03	00	00	02	00	04	06	89	264	8605	7352	+17.1%

Key to Table 1 & 2

Provinces: W: Western, C: Central, S: Southern, N: North, E: East, NC: North Central, NW: North Western, U: Uva, Sab: Sabaragamuwa.

RDHS Divisions: CB: Colombo, GM: Gampaha, KL: Kalutara, KD: Kandy, ML: Matale, NE: Nuwara Eliya, GL: Galle, HB: Hambantota, MT: Matara, JF: Jaffna,

KN: Killinochchi, MN: Mannar, VA: Vavuniya, MU: Mullaitivu, BT: Batticaloa, AM: Ampara, TR: Trincomalee, KM: Kalmunai, KR: Kurunegala, PU: Puttalam, AP: Anuradhapura, PO: Polonnaruwa, BD: Badulla, MO: Moneragala, RP: Ratnapura, KG: Kegalle.

Data Sources:

Weekly Return of Communicable Diseases: Diphtheria, Measles, Tetanus, Neonatal Tetanus, Whooping Cough, Chickenpox, Meningitis, Mumps., Rubella, CRS, Special Surveillance: AFP* (Acute Flaccid Paralysis), Japanese Encephalitis

CRS** =Congenital Rubella Syndrome

AFP and all clinically confirmed Vaccine Preventable Diseases except Tuberculosis and Mumps should be investigated by the MOH

Influenza Surveillance in Sentinel Hospitals - ILI & SARI													
Month	Human			Animal									
	No Received	ILI	SARI	Infl A	Infl B	Pooled samples	Serum Samples	Positives					
October	2351	88	13	11	1	1264	598	0					

Source: Medical Research Institute & Veterinary Research Institute

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Comments and contributions for publication in the WER Sri Lanka are welcome. However, the editor reserves the right to accept or reject items for publication. All correspondence should be mailed to The Editor, WER Sri Lanka, Epidemiological Unit, P.O. Box 1567, Colombo or sent by E-mail to chepid@sltnet.lk. Prior approval should be obtained from the Epidemiology Unit before publishing data in this publication

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