

The stages of breast cancer and what they mean

Upon receiving a breast cancer diagnosis, patients will soon receive a pathology report that informs them about the stage their cancer is in. The stage indicates how advanced the cancer is and whether or not it is limited to one area of the breast or has spread to other tissue or even other parts of the body. Understanding the stages of breast cancer can help patients cope with their diagnoses more effectively.

Once the doctor has completed all the necessary testing, patients will then receive their pathology reports, which will include the stage of the cancer. The following rundown of the various stages of breast cancer can help breast cancer patients better understand their disease.

Stage 0

Non-invasive breast cancers are considered to be in stage 0. When doctors have determined the cancer is in stage 0, that means they have not seen any indication that the cancer cells or the abnormal non-cancerous cells have spread out of the part of the breast in which they started.

Breast cancer patients may hear the term “five-year survival

rate” when discussing their disease with their physicians. The five-year survival rate refers to the percentage of people who live at least five years after being diagnosed with cancer. According to the American Cancer Society, the five-year survival rate for women with stage 0 breast cancer is nearly 100 percent.

Stage I

Stage I refers to invasive breast cancer and is broken down into two categories: stage IA and stage IB. Stage IA refers to invasive breast cancers in which the tumor is up to two centimeters and the cancer has not spread outside the breast. The lymph nodes are not involved in stage IA breast cancers. In some stage IB breast cancers, there is no tumor in the breast but there are small groups of cancer cells in the lymph nodes larger than 0.2 millimeter but not larger than two millimeters. But stage IB breast cancers may also refer to instances when there is both a tumor in the breast that is no larger than two centimeters and small groups of cancer cells in the lymph nodes that are larger than 0.2 millimeter but no larger than two millimeters. The ACS

notes that the five-year survival rate for stage I breast cancers is roughly 100 percent.

Stage II

Stage II breast cancers are also divided into two subcategories: stage IIA and stage IIB. Both subcategories are invasive, but stage II breast cancers are more complex than stage 0 or stage I breast cancers. Stage IIA describes breast cancers in which no tumor can be found in the breast, but cancer that is larger than two millimeters is found in one to three axillary lymph nodes (the lymph nodes under the arm) or in the lymph nodes near the breast bone. But an invasive breast cancer can still be considered stage IIA if the tumor measures two centimeters or smaller and has spread to the axillary lymph nodes or if the tumor is larger than two centimeters but not larger than five centimeters and has not spread to the axillary lymph nodes.

Stage IIB breast cancer describes breast cancers in which the tumor is larger than

two centimeters but no larger than five centimeters, and there are small groups of breast cancer cells in the lymph nodes. These small groups of cells are larger than 0.2 millimeters but no larger than two millimeters. Stage IIB may also be used to describe breast cancers in which the tumor is larger than two centimeters but no larger than five centimeters and the cancer has spread to between one and three axillary lymph nodes or to lymph nodes near the breastbone. Tumors that are larger than five centimeters but have not spread to the axillary lymph nodes may also be referred to as stage IIB breast cancers. The five-year survival rate for stage II breast cancers is about 93 percent.

Stage III

Stage III cancers are invasive breast cancers broken down into three categories: IIIA, IIIB and IIIC. When patients are diagnosed with stage IIIA breast cancer, that means doctors may not have found a tumor in their breast

or the tumor may be any size. In stage IIIA, cancer may have been found in four to nine axillary lymph nodes or in the lymph nodes near the breastbone. Tumors larger than five centimeters that are accompanied by small groups of breast cancer cells (larger than 0.2 millimeter but no larger than two millimeters) in the lymph nodes also indicate a breast cancer has advanced to stage IIIA. But stage IIIA may also be used to describe breast cancers in which the tumor is larger than five centimeters and the cancer has spread to one to three axillary lymph nodes or to the lymph nodes near the breastbone.

A stage IIIB breast cancer diagnosis indicates the tumor may be any size and has spread to the chest wall and/or the skin of the breast, causing swelling or an ulcer. The cancer may have spread to one to nine axillary lymph nodes or may have spread to the lymph nodes near the breastbone.

In stage IIIC breast cancer, doctors may not see any sign of cancer in the breast. If there

is a tumor, it may be any size and may have spread to the chest wall and/or the skin of the breast. To be categorized as stage IIIC, the cancer must also have spread to 10 or more axillary lymph nodes or to the lymph nodes above or below the collarbone or to the axillary lymph nodes or lymph nodes near the breastbone. The ACS notes that women diagnosed with stage III breast cancer are often successfully treated and that the five-year survival rate is 72 percent.

Stage IV

Invasive breast cancers that have spread beyond the breast and lymph nodes to other areas of the body are referred to as stage IV. Stage IV breast cancer may be a recurrence of a previous breast cancer, though some women with no prior history of breast cancer receive stage IV diagnoses. The five-year survival rate for stage IV breast cancers is 22 percent.

More information about breast cancer is available at www.breastcancer.org.

DID YOU KNOW - Diagnosis rates across the globe

Breast cancer incidence rates vary greatly across the globe. According to the World Health Organization, 19.3 per 100,000 women in Eastern Africa are diagnosed with breast cancer, while that number is nearly five times greater (89.7 per 100,000 women) in Western Europe. So what’s the reason behind that disparity? While a host of factors, including family history, can contribute to a woman’s risk for developing breast cancer, incidence rates in places like Eastern Africa could be so low due to less awareness of the

disease in such countries, where education about the importance of breast cancer screening might not be as big a priority as it is in other countries, including the United States. As a result, many incidents of breast cancer in less developed countries may go unreported and, ultimately, untreated. Emphasizing efforts to raise awareness about breast cancer may lead to higher incidence rates in less developed countries, but those same efforts also may compel more women to receive potentially lifesaving breast cancer screenings.

DID YOU KNOW - Survival rates across the globe

According to the World Health Organization, breast cancer survival rates vary greatly worldwide. While survival rates range from 80 percent or better in North America and countries such as Sweden and Japan, those figures drop to roughly 60 percent in middle-income countries. Low-income countries fare the worst, with survival rates below 40 percent. The WHO attributes the low survival rates in low-income countries to inadequate diagnosis and treatment facilities and the lack of early detection pro-

grams. Early detection is often essential when battling breast cancer, as late-stage survival rates are low regardless of where a person lives. For example, the American Cancer Society notes that, in the United States, the five-year relative survival rate for breast cancers detected in their earliest stages (often referred to as “stage 0” or “stage I”) is 100 percent.

The five-year relative survival rate in the United States is considerably lower for stage IV breast cancers, at right around 22 percent.

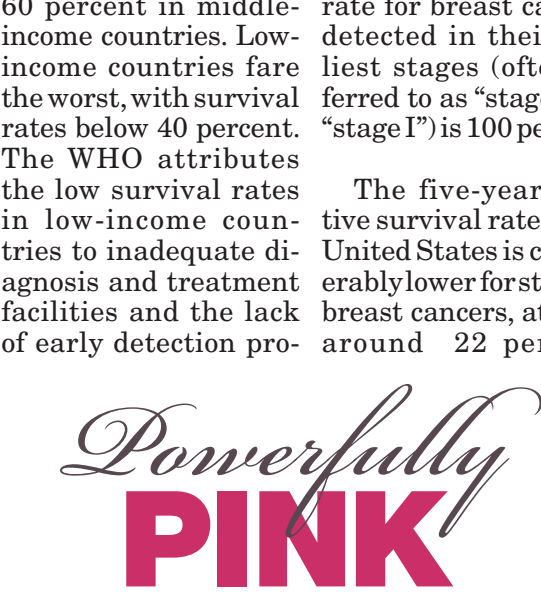
Terms to know when dealing with cancer

A cancer diagnosis is often shocking. Once the shock begins to wane and patients and their families start examining their treatment options, it’s easy to grow confused by the terminology physicians and their staffs use. The following are some common cancer terms, courtesy of the American Cancer Society and Cancer.net, to help lessen confusion and ensure cancer patients and their families are as informed as possible.

- **Ablation:** Ablation, or ablative therapy, is treatment that removes or destroys all or part of a cancer. Ablation may also refer to removing or stopping the function of an organ, such as when ovaries are removed to prevent them from making hormones.
- **Adhesions:** Adhesions are scar tissues that form after surgery or injury. If this scar tissue tightens, it can bind together organs that would normally be separate.
- **Alopecia:** Alopecia is hair loss that, in instances where cancer is present and being treated, can result from chemotherapy or radiation therapy treatments.
- **Bilateral:** When cancer is bilateral, it is present on both sides of the body. This term may be used to describe the presence of breast cancer in both breasts.
- **Biopsy:** A biopsy is the removal of a small amount of tissue for examination under a microscope to determine if cancer is present.
- **Bone marrow:** Bone marrow is soft tissue found in the center of large bones where blood cells are formed.
- **Cancer cell:** A cancer cell is one that divides and reproduces abnormally and is capable of spreading throughout the body.
- **Carcinogen:** Any substance that causes cancer or helps it to grow. Tobacco smoke is loaded with carcinogens.
- **Carcinoma:** Cancer that begins in the

lining layer of organs. The ACS notes that 80 percent of all cancers are carcinomas.

- **Chemotherapy:** A form of cancer treatment that employs drugs to kill cancer cells.
- **Five-year survival rate:** The percentage of people with a particular cancer who are alive five years or longer after diagnosis. Five-year survival rates generally improve the earlier the cancer is detected.
- **Hemoglobin:** The part of a red blood cell that carries oxygen and is often measured in complete blood count. That count can get very low in people who have cancer.
- **In situ:** In situ refers to cancer that has not spread from its point of origin to nearby tissue.
- **Invasive cancer:** Contrary to cancer described as “in situ,” cancer described as “invasive” has spread outside the layer of tissue in which it started and can potentially spread to other parts of the body.
- **K-ras:** A gene that can mutate into a cancer accelerator and allow colorectal cancer to grow.
- **Lobules:** The milk-producing glands in a woman’s breasts.
- **Metastasis:** The spread of cancer cells to one or more sites elsewhere in the body, often via the lymph system or bloodstream.
- **Oncologist:** A doctor who specializes in treating patients with cancer. There are various types of oncologists, including surgical oncologists and pediatric oncologists.
- **Precancerous:** Cells described as “precancerous” have the potential to become cancerous.
- **Sarcoma:** Cancer that develops in the tissues that support and connect the body, including fat and muscle.
- **Stage:** A way to describe cancer that may refer to its location, where it has spread and whether or not it is affecting the function of other organs in the body.



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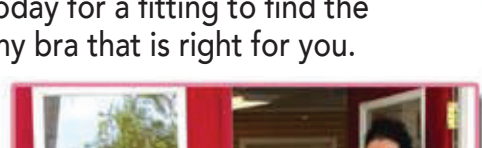
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