

# North Dakota Women's Health CORE

A National Center of *Excellence* in Women's Health Demonstration Project

## UND Women's Health Update

Volume 1, No. 5

SPECIAL EDITION

September 2005



### Information Inside

North Dakota Statistics

National Statistics

How Breast Cancer Happens

Risk Factors

Breast Self Exam

Partner Profile:  
Women's Way

Please feel free to contact us with any questions, comments, or concerns:

Womenshealth

@medicine.nodak.edu

(701)777-3274

Box 9037 Grand  
Forks, ND 58202-  
9037

**Website:**

[www.und.nodak.edu/  
dept/womenshealth/](http://www.und.nodak.edu/dept/womenshealth/)

## Breast Cancer

### *North Dakota Statistics*

- An estimated **520** new cases of Female Breast Cancer will be diagnosed in North Dakota in 2005.
- An estimated **100** North Dakota Women will die from breast cancer in 2005.
- **117.4 per 100,000** women in North Dakota were diagnosed with breast cancer in from 1997-2001.
- **25.9 per 100,000** women in North Dakota died of breast cancer from 1997-2001.

Information collected from American Cancer Society;  
Cancer Facts and Figures 2005

## National Breast Cancer Statistics

- ◆ This year an estimated **211,240** new cases of female breast cancer are expected in the United States. Breast Cancer is the most frequently diagnosed cancer in women. Every **two minutes** a woman is diagnosed with breast cancer.
- ◆ **One woman in eight** who lives to age 85 will develop breast cancer during her lifetime.
- ◆ Breast cancer is the **leading cause of death in women** between the ages of 40 and 55.

Breast cancer ranks **second among cancer deaths** in women (behind lung cancer).

Breast cancer incidence rates increased rapidly in the 1980s due to an increased use of mammography and have increased gradually since that time. The increase since 1990 is predominantly in women 50 and older.

Breast cancer mortality rates declined by 2.3% per year from 1990-2001 in all women, with larger decrease in younger (<50 years old) women. These decreases are due to increased awareness, earlier detection through screening, and improved treatment.

- ◆ **1,690** men are expected to be diagnosed with breast cancer this year and **460** are predicted to die.
- ◆ **Seventy percent** of all breast cancers are found through breast self-exams. Not all lumps are detectable by touch. We recommend regular mammograms and monthly breast self-exams.
- ◆ **Eight out of ten** breast lumps are not cancerous. If you find a lump, don't panic-call your doctor for an appointment.
- ◆ Mammography is a low-dose X-ray examination that can detect breast cancer up to two years before it is large enough to be felt. When breast cancer is found early, the five-year survival rate is **96%**. This is good news! **Over 2 million** breast cancer survivors are alive in America today

Information collected from American Cancer Society;  
Cancer Facts and Figures 2005

# Cancer in American Indian Women

## Cancer Rates, Mortality, and Risk Factors

- Data show that American Indians have lower rates than the general U.S. population for all cancers combined and for cancers of the lung, breast, and colon, though they have higher rates for other cancers, such as stomach cancer and gallbladder cancer.
- Cancer is the second leading cause of death for American Indian women.
- Breast, lung, and colorectal cancers are among the most commonly diagnosed in American Indian women.
- For all cancers combined and various site-specific cancers, the 5-year cancer survival rate for American Indian women is significantly lower than that for White women.
- Although the incidence and mortality trends among Native American women for most cancers have shown decreases during the 1990s, the proportional decreases are less than those for White women.
- Health care providers frequently cite space and time limitations and their own lack of interest as barriers that prevent them from performing cervical and breast cancer screening.
- There are great variations among tribes and regions in the number of cancer cases and the prevalence of behavioral risk factors.
- The major cancer risk factors for American Indian women include: tobacco use, poor diet, obesity, and inadequate screening for cervical and breast cancer.

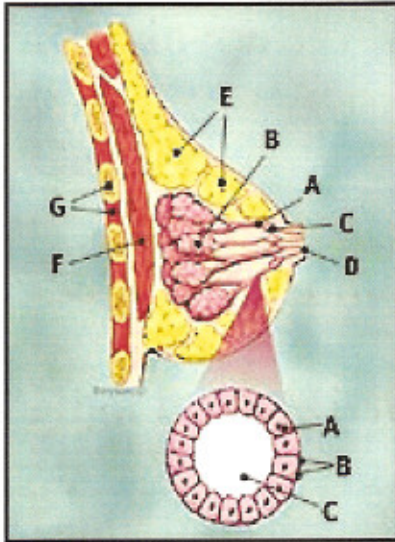
## **Breast Cancer Risk Factors**

- **Risk increases with age**
- **Genetics**
- **Personal or family history of breast cancer**
- **High breast tissue density**
- **Long menstrual history (menstrual periods starting early and ending late in life)**
- **Obesity after menopause**
- **Recent use of oral contraception, postmenopausal hormone therapy (especially combined estrogen and progestin therapy).**
- **Never having children or having children after 30**
- **Excessive alcohol consumption**

*To Calculate your risk, check out the Breast Cancer Risk Assessment Tool at:  
<http://bcra.nci.nih.gov/brc/q1.htm>*

Information collected from American Cancer Society;  
Cancer Facts and Figures 2005

# HOW BREAST CANCER HAPPENS



## **Healthy Breast profile:**

- A** Ducts
- B** Lobules
- C** Dilated section of duct to hold milk
- D** Nipple
- E** Fat
- F** Pectoralis major muscle
- G** Chest wall/rib cage

## **Enlargement**

- A** Normal duct cells
- B** Basement membrane
- C** Lumen (center of duct)

Like all parts of your body, the cells in your breasts usually grow and then rest in cycles. The periods of growth and rest in each cell are controlled by genes in the cell's nucleus. The nucleus is like the control room of each cell. When your genes are in good working order, they keep cell growth under control. But when your genes develop an abnormality, they sometimes lose their ability to control the cycle of cell growth and rest.

### **Breast cancer is an uncontrolled growth of breast cells.**

Cancer has the potential to break through normal breast tissue barriers and spread to other parts of the body. While cancer is always caused by a genetic "abnormality" (a "mistake" in the genetic material), only 5–10% of cancers are inherited from your mother or father. Instead, 90% of breast cancers are due to genetic abnormalities that happen as a result of the aging process and life in general.

While there are things every woman can do to help her body stay as healthy as possible (such as eating a balanced diet, not smoking, minimizing stress, and exercising regularly), breast cancer is never anyone's fault. Feeling guilty, or telling yourself that breast cancer happened because of something you or anyone else did, is counterproductive.

Breast cancer is the most common cancer to affect women. In 2004, it is estimated that about 216,000 new cases of invasive breast cancer will be diagnosed in the United States, along with 59,390 new cases of non-invasive breast cancer.

Every woman is at SOME risk for breast cancer—this is merely the "risk" of living as a woman. But there are many risk factors that can make one woman's picture differ substantially from another's. When you understand your own particular risk profile, you are in a better position to manage it and don't have to fear the unknown.

# Breast Self Exam

## **Step 1:**

Begin by looking at your breasts in the mirror with your shoulders straight and your arms on your hips.

Here's what you should look for:

- Breasts that are their usual size, shape, and color.
  - Breasts that are evenly shaped without visible distortion or swelling.
- If you see any of the following changes, bring them to your doctor's attention:
- Dimpling, puckering, or bulging of the skin.
  - A nipple that has changed position or an inverted nipple (pushed inward instead of sticking out).
  - Redness, soreness, rash, or swelling.



## **Step 2:**

Raise your arms and look for the same changes.

While you're at the mirror, gently squeeze each nipple between your finger and thumb and check for nipple discharge (this could be a milky or yellow fluid or blood).



## **Step 3:**

Feel your breasts while lying down, using your right hand to feel your left breast and then your left hand to feel your right breast. Use a firm, smooth touch with the first few fingers of your hand, keeping the fingers flat and together.

Cover the entire breast from top to bottom, side to side—from your collarbone to the top of your abdomen, and from your armpit to your cleavage.



## **Step 4:**

Finally, feel your breasts while you are standing or sitting. Many women find that the easiest way to feel their breasts is when their skin is wet and slippery, so they like to do this step in the shower. Cover your entire breast, using the same hand movements described in Step 3.



## Partner Profile: Women's Way

### What is Women's Way?

Women's Way provides a way to pay for most breast and cervical cancer screenings and treatment for eligible North Dakota women. This program is made possible by funding from the Centers for Disease Control and Prevention.

### What is Available?

Eligible women ages 40-49 can receive:

- Clinical Breast Exams
- Pap Tests
- Pelvic Exams

Eligible women ages 50-64 can receive:

- Mammograms
- Clinical Breast Exams
- Pap Tests
- Pelvic Exams

Limited services may be available for women ages 18-39.

### *Who qualifies?*

To take part in this program, certain income and insurance guidelines apply:

#### *2005 Income Guidelines*

Household Number	Income* Yearly	Income* Monthly
1	\$19,140	\$1,595
2	25,660	2,138
3	32,180	2,682
4	38,700	3,225
5	45,220	3,768
6	51,740	4,312
7	58,260	4,855
8	64,780	5,398
9	71,300	5,942
10	77,820	6,485

#### *Insurance Guidelines*

- No health insurance **OR**
- Unable to pay insurance deductibles and/or co-payments **OR**
- Pap tests and/or mammograms not covered by insurance plan

\*Income before taxes

Medicare covers annual screening mammograms for all female beneficiaries age 40 and older.

Revised: April 2005

### Contact Women's Way:

600 East Boulevard, Department 301, Bismarck, ND 58505-0200 1.800.44WOMEN or 701.328.2333 701.328.2036-fax

<http://www.womensway.net/>

Or Sarah Owens, at the Demo Project:  
sowens@medicine.nodak.edu;  
(701)777-3274



## Partner Profile: Women's Way

### **How many women have been screened through Women's Way ?**

*Women's Way* began offering screening services in 1997. As of January, 2005, *Women's Way* has screened 6,834 women. Through those screenings, 86 breast cancers and 558 cervical cancers and pre-cancers have been detected.

### **Where do women get screened?**

In North Dakota, most general practice health-care providers offer *Women's Way* screening services, including 313 health care facilities and 924 doctors, nurse practitioners, and physician assistants. *Women's Way* clients usually are able to receive screening services through their regular doctor.

### **Treatment For Women's Way Clients Now Available Through "Medicaid - Women's Way"**

The Breast and Cervical Cancer Prevention and Treatment Act of 2000 allows states to create a new category of Medicaid eligibility for uninsured women younger than 65. In North Dakota, this new Medicaid

category, called Medicaid - *Women's Way*, became effective July 1, 2001. The purpose of this special program is to provide medical assistance for uninsured *Women's Way* clients who have been found to have breast cancer, cervical cancer or cervical abnormalities requiring treatment.

If a *Women's Way* client is diagnosed with breast or cervical cancer or a cervical abnormality that needs treatment, she should call 1.800.44 WOMEN for more information.

More than 924 doctors, nurse practitioners and physician assistants are enrolled as participating providers, making it possible for most clients to receive services through their regular doctor at 313 facilities across North Dakota.

As many as 22,000 women in North Dakota could be eligible for *Women's Way* and receive breast and cervical screenings.

### **Contact Women's Way:**

600 East Boulevard, Department 301, Bismarck, ND 58505-0200 1.800.44WOMEN or 701.328.2333 701.328.2036-fax  
<http://www.womensway.net/>

Or Sarah Owens, at the Demo Project:  
sowens@medicine.nodak.edu  
(701)777-3274

