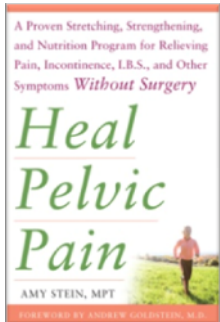




NEWSLETTER

VOLUME 5 SPRING 2008



COMING IN SEPTEMBER

BOOK BY AMY STEIN, MPT

Heal Pelvic Pain

A Proven Stretching, Strengthening, and Nutrition Program for Relieving Pain, Incontinence, I.B.S., and Other Symptoms

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BBPT
News

MAINTAINING PROPER BREAST HEALTH BY Roseanne Cruz, DPT

According to the National Cancer Institute (NCI), there were 178,480 new female cases and 2,030 new male cases in 2007 and 41,010 deaths due to breast cancer in 2007. \$8.1 billion is spent on breast cancer treatments annually.

There are many factors that may increase the risk of breast cancer. Estrogen stimulates breast cell division. Studies have shown that women with higher estrogen levels tend to develop cancer or have a greater risk for the cancer returning. Individuals who are obese may have increased estrogen levels after menopause. According to the New England Journal of Medicine there was a sharp decline in breast cancer cases with a decline in the use of hormone replacement therapy (HRT).

Other factors include exposure to radiation and alcohol ingestion. According to the journal Cancer Epidemiology, Biomarkers, and Prevention, those who drank at least 2 glasses of alcohol a day had an 80% higher risk of breast cancer than non-drinkers.

In cross-sectional studies of adult populations, 5% to 10% of women have a mother or sister with breast cancer, and about twice as many have either a first-degree relative or a second-degree relative with breast cancer. BRACA tests, for BRCA-1 and BRCA-2, check for genetic mutations of these genes. Only about 1 in 800 has an actual mutation so a negative result doesn't mean that a person will not develop breast cancer. It only means that the cancer isn't hereditary. Studies done by the NCI show that 14-87% of individuals carrying the BRCA gene will likely develop breast cancer.

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Breast Health

Please Donate to



Statistics show:

- 15% of the female population suffers from chronic pelvic pain (approx 200 million women globally); **61% of these women go undiagnosed**
- 13.8% of the male population suffer from chronic pelvic pain
- RESULTING EFFECTS on chronic pelvic pain sufferers:
 - Inability to work, exercise, perform everyday chores
 - Difficulty walking, sleeping, socializing
 - Interference with sexuality and family life

The International Pelvic Pain Society (IPPS), a non-profit organization, was formed in 1996 by Dr. Jim Carter, Dr. Fred Howard, and Dr. Paul Perry, with its main objective of significantly raising public awareness and its impact on an individual's life. IPPS' mission is focused on optimizing the diagnosis and treatment of patients suffering from chronic pelvic pain, and serving as an educational resource for health care professionals. IPPS is broadly funded by donations. We need your help!

Ways of Giving: Two ways to Contribute:

1. **General Gift/Donation**-to develop more public awareness and to serve as an educational resource for health care professionals.

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International
Pelvic Pain
Society

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MAINTAINING PROPER BREAST HEALTH

There are slight differences in diagnosing pre-menopausal versus post-menopausal women. The Journal of the National Cancer Institute identified breast density as an important risk factor. For pre-menopausal women, the risk factors included age, breast density, family history of breast cancer, and prior cancer diagnosis. For post-menopausal women, the risk factors included ethnicity, body mass index, age at natural menopause, use of hormone therapy, and a prior false-positive mammogram, in addition to all the risk factors for pre-menopausal women.

There are a few ways that may help to decrease the risk of developing breast cancer. One way to decrease the risk is through exercise. According to the Archives of Internal Medicine, strenuous long term physical activity decreases risk. To reduce the risk of breast cancer, the American Cancer Society recommends doing 45 to 60 minutes of physical activity 5 or more days a week. If diagnosed, a person in good shape will have an easier recovery time from surgery and treatment rather than someone who is inactive.

Breast health is extremely important as well. It is recommended to start doing self breast examination at age 21 to feel for any abnormalities in the breast tissue. Also, wearing a proper-fitting bra may help to prevent the development of breast cancer. Tight-fitting bras may prevent adequate lymphatic flow, and may cause a build-up of toxins in the breast and the formation of cysts.

Surgical procedures may also reduce breast cancer risk. A prophylactic mastectomy is the removal of the breast to prevent breast cancer. However, since there is no cancer present, lymph node removal is not performed. It is usually followed by breast reconstructive surgery. A prophylactic oophorectomy, however, is preventative for both breast and ovarian cancers. It is usually recommended for women who have the mutation in the BRCA-1 and BRCA-2 genes.

There are a number of ways to diagnose the presence of breast cancer. The mammogram is the gold standard for screening for breast cancer. Individuals with increased risk may be screened at 30 years old or younger, otherwise start screening at age 40. Mammograms may be difficult to read due to dense breast tissue, particularly in women who are undergoing estrogen replacement therapy. Women are often diagnosed in between annual screenings. Ultrasound can be used as well; however, ultrasound or MRI is used only in conjunction with a mammogram.

Breast thermography is another way of detecting breast cancer. It is not a replacement for mammography, but may be used along with mammography. Breast thermography detects increased blood circulation and metabolic changes associated with tumor formation and growth. It can show a pre-cancerous breast or a tumor that is not large enough to be detected through physical examination.

Following breast cancer surgery, patients will benefit from physical therapy to restore pre-morbid ADL function and reduce the risk of complications such as lymphedema. Physical therapy treatments will include soft tissue and scar mobilization, therapeutic exercises for stretching and strengthening, manual lymph drainage and bandaging if lymphedema develops, and an individualized home program. Patients that adhere to a home program that includes regular exercise are more likely to experience improved endurance for ADL's as well as an increased overall fitness level and greater sense of well-being.

Breast health should be considered as part of any wellness program. For individuals who have undergone treatment for breast cancer, physical therapists should be included as part of the medical team to provide interventions that can speed recovery and restoration of optimum function and quality of life.

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PLEASE DONATE TO THE INTERNATIONAL PELVIC PAIN SOCIETY

2. **James E. Carter, MD Memorial Lecture Fund of IPPS-** will be used to educate health care professionals in the area of chronic pelvic pain.

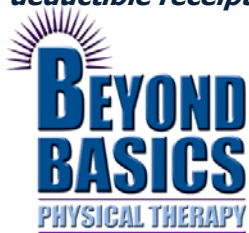
IPPS is recognized by the Internal Revenue Service (IRS) as a charitable organization under section 501(c)3 of the IRS code. Contributions to IPPS are tax-deductible by donors as provided in section 170 of the IRS Code.

PLEASE SEND TO: IPPS James E. Carter Memorial Lecture Fund; Two Woodfield Lake; 1100 E. Woodfield Lake Suite 520; Schaumburg, Illinois 60173-4950

OR: link to: <https://wjweis.sslcert19.com/securesite/ipps/support/>

OR: send your donation to Beyond Basics Physical Therapy and we will send you a tax-deductible receipt for the IPPS.

Thank You, Amy Stein, MPT, Board Member of IPPS



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Mammography



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