Screening for Breast Health

Breast cancer is the most common form of cancer among females in Hong Kong, fortunately survival rates are very high if detected early. The risk of breast cancer is higher with increased age, though it is possible for breast cancer to occur in younger age groups.



Breast Self-Examination

Step 1 Look at your breasts in the mirror with your shoulders straight and your arms on your hips. You



on your hips. You should be looking to see if:

- your breasts are their usual size, shape and colour.
- your breasts are evenly shaped without visible distortion or swelling.
- Step 2 Raise your arms and look again for the same findings as above.



Step 3 To check for nipple discharge, gently squeeze each nipple between your finger and thumb (this could be a milky or yellow fluid or blood).

Step 4 Next, lie on the bed and check each breast with the



opposite hand. Keep the fingers together, firmly touch the entire breast from top to bottom, side to side. Alternatively, you can start at the nipple, then move in circles until you reach the outer edge of the breast. Make sure you cover all breast tissue. In denser breast areas, use a firmer touch.

Step 5 Lastly, you can examine your breast while you are standing or sitting. During a shower is often a good time for



breast examination as many women find it easier to feel their breasts when their skin is wet and slippery. Use the same method described in step 4.

Breast cancer

Breast cancer develops when normal cells in the breast change and grow out of control. It can happen in BOTH women and men, yet the rate in women is higher. Early breast cancer usually does not cause pain or show any symptoms at all. As the cancer grows, however, it can cause the following changes:

- A lump or thickening in or near the breast or under the armpit
- A change in the size or shape of the breast
- A change in the way the breast or nipple looks or feels
- Ridges or pitting of the breast the skin resembles the surface of an orange
- Nipple discharge or nipple tenderness; the nipple may also be inverted, or pulled back into the breast

Cancer can invade the breast tissue and spread to the underarm lymph nodes and other sites of the body, such as the lungs and bones. However, the survival rate of breast cancer is very high if it is detected at an early stage.

Breast cancer screening

It is believed that family history plays an important role in breast cancer. However, only five to six percent of all breast cancer cases are believed to be genetically related. Two genes, BRCA1 and BRCA2, are involved in the development of breast cancer and women can have a blood test to check for the presence of these genes.

Whilst regular screening for breast cancer will not prevent the disease, studies have shown that it will increase the chance of early detection, at a stage when it is easier to treat. There are a few ways to screen for breast cancer:

Self-examination

From the age of 20, take the time to do a visual and breast self examination. To do a self examination, please follow the instructions in this information sheet or consult a doctor or nurse.

Clinical check up

From the age of 30, women should visit their doctor every year to have a breast examination. During a breast examination, the doctor or nurse will look at the breasts and carefully feel each breast and the area under the arm. The doctor will look for any lumps, nipple discharge or changes in the tissue or skin.

Mammograms

From the age of 40, women should consider having mammograms every two years until the age of 70. A mammogram is an x-ray of the breast. It detects lumps much smaller (3 mm) than those that can be felt by women themselves, or by the most experienced physicians. Therefore, mammograms can detect cancer early, before it spreads to other parts of the body.

The above are three common breast cancer screening tools. The following tests can also be done to investigate breast cancer if necessary.

Breast MRI

The use of breast MRI to screen for breast cancer is controversial. Breast MRI uses magnetic resonance to create a fine image of the breast. It does not have radiation. It is not necessary for most women to use MRI as a cancer screening tool because when compared with a mammogram, it is less effective in detecting certain breast problems. It may produce



a false positive result of breast cancer. However, studies have shown that in women of young age and high cancer risk (e.g. with BRCA1 or BRCA2), breast MRI is a more sensitive screening test to detect breast cancer than a mammogram.

Breast ultrasound

A breast ultrasound is best for women below 40 years old. It is mainly used to screen a limited area of breast and is often used to detect any filled cysts or solid lumps.

Having mammogram

A mammogram is a fairly routine procedure though some women may find it uncomfortable. Before the procedure, a short questionnaire will be completed to determine the medical history. A gown will be provided, the bra and any accessories around the neck should be removed.

During the procedure, a female radiographer will position the patient's breasts on the plates. This can make some women feel uncomfortable, but the radiographer is trained to do this and works quickly. The x-ray plates will compress the breast tissue. This can be painful, but will last no more than 30 seconds.

Each breast is x-rayed at least twice, once from the top down and the other from side to side so that the radiographer can get a good look at the tissue.

When booking a mammogram consider:

- 1. It is best to have the mammogram right after the period, as the breast will be least tender or swollen. If menstruation is about to start or has started, try to reschedule the appointment.
- 2. Do not wear deodorant or talcum powder.
- 3. This test is not suitable for pregnant women.
- 4. If oral contraceptives are used, schedule the test on the day a new pill pack starts.

What if the result is abnormal?

Do not panic if the result of the mammogram is abnormal. Nine out of 10 women with an abnormal mammogram turn out NOT to have breast cancer. Depending on the doctor's assessment, more diagnostic tests might be needed in order to investigate the abnormality. An example would be a breast biopsy where a small amount of tissue from the breast is taken out and sent to a laboratory to test for the presence of cancer cells.

If the doctor thinks that the abnormal result is probably not due to cancer, another mammogram in six months might be suggested.

What about the risks?

Screening is recommended for early detection of breast cancer, which will enable treatment to take place when it is easier to control the disease. However, ladies should also understand the risks involved.

A mammogram involves using radiation, however, the dose of radiation is very low. Evidence clearly suggests that the life-saving benefits of early cancer detection far outweigh the risk of low-level radiation exposure.

Screening for breast cancer may produce false-positive results that require further testing. There is also a possibility for overdiagnosis, which means that patients receive treatment for a cancer that, if undiscovered, would not have caused any harm.

Always seek the advice and guidance of attending physicians to discuss options that are relevant to the individual's unique circumstances, such as age, family history, and other considerations.

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References:

Centre for Health Protection, Hong Kong

The materials contained here are for general health information only, and are not intended to replace the advice of a doctor. Matilda International Hospital and Matilda Medical Centres will not be liable for any decisions the reader makes based on this material.



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及

及早檢驗 預防乳癌

乳癌是香港女性中最常見的癌症。 然而,若能及早檢測,存活率十分高。 儘管患乳癌的風險會隨著年齡而增長, 年輕的女性也會患上乳腺癌。



乳房自我檢查

第一步 站在鏡前,肩膀 成一直線,把雙 手放在盆骨上, 觀察胸部有否 以下改變:



- 胸部大小、形狀及顏色與 平時有分別
- 胸部形狀是否平均分布、 凹凸不均或特別腫脹

第二步 舉高雙手及重覆 第一步的檢查, 觀察是否有異。



第三步 用姆指及食指輕

按乳頭,觀察乳頭有否滲出 分泌物,如奶白色或黄色的 分泌物或血。

第四步 躺在床上,

用相反的手 檢查乳房, 手指應齊放 及穩固地



由上至下再由左至右地檢查 乳房。步驟可從乳頭開始, 用手指齊放,打圈地檢查至 乳房的外邊。而乳房較深層 的位置,則可用較大力度檢 查。切記要檢查所有乳房組 織。

第五步 最後,站立或坐 下,用同一方法 檢查乳房。不少 女士都會於洗澡 時作乳房檢查,



因為乳房較濕滑,會較容易 檢查。

乳癌

乳癌是指乳房的正常細胞出現病變並且不受控制地生長。雖然男女都可以患上乳癌, 但女士罹患的比率較高。早期的乳癌通常沒有徵狀,而患者亦不會感到任何痛楚,但 隨著癌細胞逐漸生長,乳房或會出現以下變化:

- 乳房周圍或腋下出現硬塊
- ・ 乳房大小或形狀改變
- 乳頭表面或形狀出現變化,觸感亦有改變
- · 乳房出現坑紋或脊狀,或呈橙皮紋
- 乳頭變硬或流出分泌物;或出現凹陷情況

癌細胞可以入侵乳房組織及擴散至腋下的淋巴腺,甚至會擴散到肺部和骨骼等。 不過,如乳癌能及早發現,病人的存活率卻很高。

乳房健康檢查

不少人相信患上乳癌的成因與家族病史有關。然而,5至6%的病例相信是由基因所 致。兩種引發癌症基因分別為BRCA1和BRCA2。驗血可測試這兩種基因有否存在。

定期的乳癌檢查雖不能完全預防乳癌出現, 惟研究顯示,及早診斷及治理,能減低乳癌的 死亡率。以下是不同乳房檢查方法:

從20歲開始,便應自我檢查。請參考乳房自我 檢查列表,或請教醫生或護士。

從30歲開始,女士應每年約見醫生作乳房檢 查。醫生或護士會觀察和觸檢乳房及腋下,以 識別異常狀況,如是否有硬塊、分泌物或皮膚 變化等。

乳房X光造影檢查

從40歲開始,可考慮每兩年作乳房X光造影檢 查,直至70歲。乳房X光造影檢查是乳房軟組 織的X光照片,能檢測出少至三毫米的硬塊,

精準度比起自我檢查或觸檢高,有助於癌細胞擴散至其他部位前檢測出來。

以上是檢測乳癌的方法,醫生會因應病人的個別情況而建議下列的跟進檢查。

乳房磁力共振

利用磁力共振檢測乳癌仍存在爭議,惟磁力共振不含輻射,而是利用磁力共振原理來 拍攝乳房照片。一般情況下,X光造影較磁力共振更能有效檢測相關的乳房病徵。另 外,磁力共振的檢測結果有機會呈假陽性。然而,研究顯示磁力共振對於一些年輕而 高風險的女士(有癌症基因 BRCA1或BRCA2)而言,磁力共振檢測的敏感度則較高。





乳房超聲波測試

這項檢查適合40歲以下的女士。測試會檢查局部乳房並找出水囊或硬塊。

乳房X光造影檢查過程

乳房×光造影檢查過程十分簡單。部分女士檢測時或會感到不舒服,檢查進行前須填寫問卷以便醫護人員能更了解其病歷,並換上長袍、脱去胸圍和飾物。

女放射治療師會協助病人把乳房固定在適當位置,女士可能會感覺不自在,但放射治療師乃受過專業訓練並能迅速完成檢查程序。 X 光板會將乳房組織固定,屆時可能會感到一點痛楚,檢查只需約30秒。每邊乳房需最少照射兩次,一次由乳房的上至下,第二次在乳房的兩邊,以確保取得整個乳房的造影。

接受檢查前的準備:

- 1 最好在月經來潮後隨即接受檢查,因為乳房將不會腫脹或特別敏感。如月經開始或 將會來潮,請另安排時間作檢查。
- 2 請勿在檢查前使用止汗劑或爽身粉。
- 3 懷孕期間不宜接受此檢查。
- 4 如正服用避孕藥,請於開始一包新藥當天接受檢查。

檢查結果異常怎麼辦?

如檢查結果異常,請勿擔心。九成得出異常結果的女士均非患上乳癌,須醫生作進一步的評估,病人或需要接受其他測試,如活組織切片化驗,以作診斷。活組織切片檢查會抽取一小部分的乳房組織送到化驗室作癌細胞測試。

如醫生認為所得出的異常結果並非由癌症所致,醫生或會建議病人於六個月後再作 另一次乳房×光造影檢查。

檢查風險

乳房檢查能及早檢測乳癌,從而及早治療及控制病情。然而,女士們需清楚了解檢查 的風險。

X 光造影檢查具輻射性,但其輻射量很低,研究指出,及早發現癌病的益處遠遠超越輻射可能帶來的風險。

乳癌檢查或會得出假陽性結果,從而令病人需作更多測試。由於部分病變不會演變成 為癌症,檢測得出的假陽性結果有時會帶來不必要的治療及焦慮。

乳房檢查需視乎年齡、家族病史或其他因素作考慮,因此建議病人向醫生查詢及商討。

核對: 潘彥芝醫生 **參考資料:**

香港衛生防護中心

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