



**SUMMIT ESC's**  
**WELLNESS PROGRAM**

Energize, Socialize, Come Alive!

## Wellness Matters

### In This Issue...

- October Focus-October is Breast Cancer Awareness Month
- Breast Cancer in Men
- Everyone Needs to Feel Appreciated
- Try the Y!
- Healthy Recipes

### What You Need to know about Breast Cancer

Breast cancer is the most common invasive cancer in women and the second leading cause of cancer death in women after lung cancer. Advances in screening and treatment for breast cancer have improved survival rates dramatically since 1989. According to the American Cancer Society (ACS), there are more than 3.1 million breast cancer survivors in the United States. The chance of any woman dying from breast cancer is around 1 in 38 (2.6%). The ACS estimate that 268,600 women will receive a diagnosis of invasive breast cancer, and 62,930 people will receive a diagnosis of noninvasive cancer in 2019. In the same year, the ACS report that 41,760 women will die as a result of breast cancer. However, due to advances in treatment, death rates from breast cancer have been decreasing since 1989. Awareness of the symptoms and the need for screening are important ways of reducing the risk. In rare instances, breast cancer can also affect men, but this article will focus on breast cancer in women.



### Symptoms

Regular screenings are important to reduce the risks of breast cancer.

The first symptoms of breast cancer usually appear as an area of thickened tissue in the breast or a lump in the breast or an armpit.

Other symptoms include:

- pain in the armpits or breast that does not change with the monthly cycle
- pitting or redness of the skin of the breast, similar to the surface of an orange
- a rash around or on one of the nipples
- discharge from a nipple, possibly containing blood
- a sunken or inverted nipple
- a change in the size or shape of the breast
- peeling, flaking, or scaling of the skin on the breast or nipple

Most breast lumps are not cancerous. However, women should visit a doctor for an examination if they notice a lump on the breast.

## Stages

A doctor stages cancer according to the size of the tumor and whether it has spread to lymph nodes or other parts of the body.

There are different ways of staging breast cancer. One way is from stage 0–4, with subdivided categories at each numbered stage. Descriptions of the four main stages are listed below, though the specific substage of a cancer may also depend on other specific characteristics of the tumor, such as HER2 receptor status.

- Stage 0: Known as ductal carcinoma in situ (DCIS), the cells are limited to within the ducts and have not invaded surrounding tissues.
- Stage 1: At this stage, the tumor measures up to 2 centimeters (cm) across. It has not affected any lymph nodes, or there are small groups of cancer cells in the lymph nodes.
- Stage 2: The tumor is 2 cm across, and it has started to spread to nearby nodes, or is 2–5 cm across and has not spread to the lymph nodes.
- Stage 3: The tumor is up to 5 cm across, and it has spread to several lymph nodes or the tumor is larger than 5 cm and has spread to a few lymph nodes.
- Stage 4: The cancer has spread to distant organs, most often the bones, liver, brain, or lungs.

## Causes

After puberty, a woman's breast consists of fat, connective tissue, and thousands of lobules. These are tiny glands that produce milk for breastfeeding. Tiny tubes, or ducts, carry the milk toward the nipple.

Cancer causes the cells to multiply uncontrollably. They do not die at the usual point in their life cycle. This excessive cell growth causes cancer because the tumor uses nutrients and energy and deprives the cells around it.

Breast cancer usually starts in the inner lining of milk ducts or the lobules that supply them with milk. From there, it can spread to other parts of the body.

## Risk Factors

The exact cause of breast cancer remains unclear, but some risk factors make it more likely. It is possible to prevent some of these risk factors.

### 1. Age

The risk of breast cancer increases with age. At 20 years, the chance of

developing breast cancer in the next decade is 0.06%. By the age of 70 years, this figure goes up to 3.84%.

## **2. Genetics**

If a close relative has or has had breast cancer, a person's chance of developing breast cancer increases.

Women who carry the BRCA1 and BRCA2 genes have a higher chance of developing breast cancer, ovarian cancer, or both. People can inherit these genes from their parents. TP53 is another gene with links to increased breast cancer risk.

## **3. A history of breast cancer or breast lumps**

Women who have previously had breast cancer are more likely to have it again than those who have no history of the disease.

Having some types of noncancerous breast lump increases the chance of developing cancer later on. Examples include atypical ductal hyperplasia or lobular carcinoma in situ.

## **4. Dense breast tissue**

Women with more dense breasts are more likely to receive a diagnosis of breast cancer.

## **5. Estrogen exposure and breastfeeding**

Breastfeeding for over 1 year appears to reduce the risk of breast cancer.

Extended exposure to estrogen appears to increase the risk of breast cancer.

This could be due to a person starting their periods earlier or entering menopause at a later than average age. Between these times, estrogen levels are higher. Breastfeeding, especially for over 1 year, appears to reduce the chance of developing breast cancer. This is possibly due to the drop in estrogen exposure that follows pregnancy and breastfeeding.

## **6. Body weight**

Women who become overweight or develop obesity after menopause may also have a higher chance of developing breast cancer, possibly due to increased estrogen levels. High sugar intake may also be a factor.

## **7. Alcohol consumption**

A higher rate of regular alcohol consumption appears to play a role in breast cancer development. According to the National Cancer Institute (NCI), studies have consistently found that women who consume alcohol have a higher risk of breast cancer than those who do not. Those who drink moderate to heavy levels of alcohol have a higher risk than light drinkers.

## **8. Radiation exposure**

Undergoing radiation treatment for a different cancer may increase the risk of developing breast cancer later in life.

## **9. Hormone treatments**

According to the NCI, studies have shown that oral contraceptives may slightly increase the risk of breast cancer. According to the ACS, studies have found that hormone replacement therapy (HRT), specifically estrogen-progesterone therapy (EPT), is related to an increased risk of breast cancer.

## **Cosmetic Implants and Breast Cancer Survival**

A 2013 review found that women with cosmetic breast implants who received a diagnosis of breast cancer also had a higher risk of dying from the disease.

This could be due to the implants masking cancer during screening or because the implants bring about changes in breast tissue. However, a 2015

review published in *Aesthetic Surgery Journal* found that having cosmetic breast implant surgery did not increase the risk of breast cancer.

Scientists need to carry out more research to confirm the link.

## Types

There are several different types of breast cancer, including:

- **Ductal carcinoma:** This begins in the milk duct and is the most common type.
- **Lobular carcinoma:** This starts in the lobules.

Invasive breast cancer occurs when the cancer cells break out from inside the lobules or ducts and invade nearby tissue. This increases the chance of cancer spreading to other parts of the body. Noninvasive breast cancer develops when the cancer remains inside its place of origin and has not yet spread. However, these cells can sometimes progress to invasive breast cancer.

## Diagnosis

A doctor often diagnoses breast cancer as the result of routine screening or when a woman approaches her doctor after detecting symptoms. Several diagnostic tests and procedures help to confirm a diagnosis.

### Breast Exam

The doctor will check the breasts for lumps and other symptoms. During the examination, the person may need to sit or stand with their arms in different positions, such as above their head or by their sides.

### Imaging Tests

**Mammogram:** This is a type of X-ray that doctors commonly use during an initial breast cancer screening. It produces images that can help a doctor detect any lumps or abnormalities. A doctor will usually follow any suspicious results with further testing. However, mammography sometimes shows a suspicious area that turns out not to be cancer.

**Ultrasound:** This scan uses sound waves to help a doctor differentiate between a solid mass and a fluid-filled cyst.

**MRI:** Magnetic Resonance Imaging (MRI) combines different images of the breast to help a doctor identify cancer or other abnormalities. A doctor may recommend an MRI as a follow-up to a mammogram or ultrasound. Doctors sometimes use them as a screening tool for those at higher risk of breast cancer.

### Biopsy

In a biopsy, the doctor extracts a sample of tissue and sends it for laboratory analysis. This shows whether the cells are cancerous. If they are, a biopsy indicates which type of cancer has developed, including whether or not the cancer is hormone sensitive.

Diagnosis also involves staging the cancer to establish:

- the size of a tumor
- how far it has spread
- whether it is invasive or noninvasive

Staging provides a picture of a person's chances of recovery and their ideal course of treatment.

## Treatment

Treatment will depend on several factors, including:

- the type and stage of the cancer
- the person's sensitivity to hormones
- the age, overall health, and preferences of the individual

The main treatment options include:

radiation therapy

- surgery
- biological therapy, or targeted drug therapy
- hormone therapy
- chemotherapy

Factors affecting the type of treatment a person has will include the stage of the cancer, other medical conditions, and their individual preference.

## Surgery

If surgery is necessary, the type will depend on both the diagnosis and individual preference. Types of surgery include:

**Lumpectomy:** This involves removing the tumor and a small amount of healthy tissue around it. A lumpectomy can help prevent the spread of the cancer. This may be an option if the tumor is small and easy to separate from its surrounding tissue.

**Mastectomy:** A simple mastectomy involves removing the lobules, ducts, fatty tissue, nipple, areola, and some skin. In some types, a surgeon will also remove the lymph nodes and muscle in the chest wall.

**Sentinel Node Biopsy:** If breast cancer reaches the sentinel lymph nodes, which are the first nodes to which a cancer can spread, it can spread into other parts of the body through the lymphatic system. If the doctor does not find cancer in the sentinel nodes, then it is usually not necessary to remove the remaining nodes.

**Axillary Lymph Node Dissection:** If a doctor finds cancer cells in the sentinel nodes, they may recommend removing several lymph nodes in the armpit. This can prevent the cancer from spreading.

**Reconstruction:** Following mastectomy, a surgeon can reconstruct the breast to look more natural. This can help a person cope with the psychological effects of breast removal.

## Radiation therapy

A person may undergo radiation therapy around a month after surgery. Radiation involves targeting the tumor with controlled doses of radiation that kill any remaining cancer cells.

## Chemotherapy

A doctor may prescribe cytotoxic chemotherapy drugs to kill cancer cells if there is a high risk of recurrence or spread. When a person has chemotherapy after surgery, doctors call it adjuvant chemotherapy.

Sometimes, a doctor may choose to administer chemotherapy before surgery to shrink the tumor and make its removal easier. Doctors call this neoadjuvant chemotherapy.

## Hormone Blocking Therapy

Doctors use hormone blocking therapy to prevent hormone sensitive breast cancers from returning after treatment. Hormone therapy may be used to treat estrogen receptor (ER)-positive and progesterone receptor (PR)-positive cancers. They usually administer hormone blocking therapy after surgery but might sometimes use it beforehand to shrink the tumor.

Hormone blocking therapy may be the only option for people who are not suitable candidates for surgery, chemotherapy, or radiotherapy.

Doctors may recommend a person has hormone therapy for 5–10 years after surgery. However, the treatment will not affect cancers that are not sensitive to hormones.

Examples of hormone blocking therapy medications may include:

- tamoxifen
- aromatase inhibitors
- ovarian ablation or suppression
- Goserelin, which is a luteinizing hormone-releasing agonist drug that suppresses the ovaries

Hormone treatment may affect fertility.

## Biological Treatment

Targeted drugs can destroy specific types of breast cancer. Examples include:

- trastuzumab (Herceptin)
- lapatinib (Tykerb)
- bevacizumab (Avastin)

Treatments for breast and other cancers can have severe adverse effects. When deciding on a treatment, people should discuss the potential risks with a doctor and look at ways to minimize the side effects.

## Outlook

A person's outlook with breast cancer depends on the staging. Early detection and treatment usually lead to a positive outlook.

According to the ACS, a person who receives treatment for stage 0 or stage 1 breast cancer has a 99% chance of surviving for at least 5 years after being diagnosed, when compared to women who do not have cancer. If breast cancer reaches stage 4, the chance of surviving another 5 years reduces to around 27%. Regular checks and screening can help detect symptoms early. Women should discuss their options with a doctor.

## Regular screening

The American College of Radiologists recommend yearly screenings for women of average risk who are over 40 years of age. There are several different guidelines for how often women should have breast cancer screening.

The American College of Physicians (ACP) recommend that women aged 40–49 years with an average risk of breast cancer should discuss the benefits and risks of regular screenings with a doctor. Between 50 and 74 years of age, women who have an average risk should undertake screenings every 2 years. Beyond 75 years of age, doctors only recommend screenings for women with a life expectancy of 10 or more years. The ACS suggest that women of average risk can choose to have yearly scans from the age of 40 years onward. Those who have not should start annual screening at 45 years of age. They may decide to switch to screenings every other year when they reach 55 years of age. The American College of Radiologists recommend screenings every year, starting from 40 years of age. Despite the different recommendations, most experts agree that women should talk to their doctors about breast cancer screening from 40 years of age onward.

## Prevention

There is no way to prevent breast cancer. However, certain lifestyle decisions can significantly reduce the risk of breast cancer as well as other types.

These include:

- avoiding excessive alcohol consumption
- following a healthful diet containing plenty of fresh fruit and vegetables



- getting enough exercise
- maintaining a healthy body mass index (BMI)

Women should consider their options for breastfeeding and the use of HRT following menopause, as these can also increase the risk.

Preventive surgery is also an option for women at high risk of breast cancer.

<https://www.medicalnewstoday.com/articles/37136.php>

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SUMMIT ESC's  
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Energize, Socialize, Come Alive!

**Summit Educational Service Center's Wellness  
Committee is sponsoring**

**PINK OUT DAY**

**on October 25, 2019 to support Breast Cancer  
Awareness Month**



**All participating staff please meet in the main reception  
area at noon for a group photo.**

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## **Breast Cancer in Men**

Male breast cancer is a relatively rare cancer but one that doctors often diagnose in the later stages. Knowing how to recognize the signs can help a person get early treatment. Male breast cancer accounts for fewer than 1% of all cancer diagnoses worldwide. A man's lifetime risk of developing breast cancer is about 1 in 833, according to the American Cancer Society (ACS). The outlook for male breast cancer is excellent if diagnosis occurs in the early

stages. However, early diagnosis is not always possible. One factor in diagnosis delay is a lack of awareness. While many women know how to look out for changes that could indicate breast cancer, there is less awareness among men, which means they may be less likely to seek help in the early stages. Breast cancer can also affect males differently, as they have a small amount of breast tissue in comparison with females. This can make it easier to detect small lumps, but it also means that the cancer has less room to grow within the breast. As a result, it may spread more quickly to nearby tissues.

For these and other reasons, around 40% of men with breast cancer receive a diagnosis in stage 3 or 4, when the disease has already spread to other parts of the body. As a result, overall survival rates are lower for men than for women.

## Symptoms

The main symptom of male breast cancer is a lump in the breast area.

Possible symptoms of male breast cancer include:

- a lump in one breast, which is usually painless
- nipple retraction, ulceration, and discharge
- skin puckering or dimpling on the breast
- redness or scaling of the skin on the breast or nipple

If cancer spreads, additional symptoms may include:

- swelling in the lymph glands, in or near the underarm area
- breast pain
- bone pain

## Statistics and Survival Rates

The prognosis for breast cancer in men is similar to that in women.

According to the American Cancer Society, the chances of surviving 5 years or more after diagnosis are, on average:

- 96% when cancer affects only the breast tissue at diagnosis
- 83% when it affects nearby areas as well as the breast
- 23% when it has spread to other parts of the body

For this reason, it is essential to seek help as soon as a person notices changes. Early stage breast cancer responds well to treatment. Diagnostic methods and treatments have improved in the last few years, and so the chances of living for at least 5 years after diagnosis are probably higher than the above figures for people currently receiving a diagnosis.

## Tests and Diagnosis

If a person notices changes in their breast, they should see a doctor.

The doctor will ask about symptoms and the individual's personal and family medical history, including any history of estrogen use or radiation treatment.

They will also carry out a physical examination.

They may suggest the following tests:

- a mammogram
- an ultrasound
- a nipple discharge test
- a biopsy

Sometimes, a doctor will recommend removing a lump and carrying out a biopsy at the same time. They may only remove a part of the area that appears to be affected and carry out a test, or they may remove the whole area, including some of the normal breast tissue surrounding it.



## Treatment

If results show that cancer is present, several treatment options are available. The choice will depend on how big the tumor is and whether cancer has spread to other areas.

### Surgery

**Mastectomy:** The surgeon removes the whole breast and some of the surrounding tissue.

**Breast-conserving Surgery:** The surgeon removes only part of the breast.

**Lymphectomy:** The surgeon removes the affected lymph nodes.

A doctor will advise on the best option.

### Radiation Therapy

Some people may need radiation therapy after surgery to remove any remaining traces of cancer. It is also a treatment option in the later stages of the disease.

### Estrogen Hormone Therapy

Anyone who has concerns about breast changes should see their doctor.

In some cancers, estrogen receptors are present on the walls of the cancerous cells. In these cases, estrogen helps the cells to divide and grow.

Hormone therapy can block the effects of estrogen and slow the growth of cancer.

Tamoxifen prevents estrogen from entering the cancerous cells. Another drug, toremifene (Fareston), is similar but only has approval for people with late stage breast cancer that has spread to other parts of the body.

Aromatase inhibitors block the effects of the aromatase protein. This, in turn, reduces estrogen levels in the body. These drugs have proven effective in treating breast cancer in women, and some doctors prescribe them for male breast cancer. Fulvestrant (Faslodex) destroys estrogen receptors. Doctors may prescribe it for people with late stage breast cancer.

Depending on the type, hormone treatment can have adverse effects, such as hot flashes, sexual problems, fatigue, mood swings, a higher risk of blood clots, bone thinning, and pain in the muscles and joints.

### Chemotherapy

In some cases, a doctor may recommend chemotherapy. This is treatment with a drug that kills cancer cells. A doctor often gives it as an injection, but sometimes a person can take it by mouth. Chemotherapy can prevent cancer from returning if a person uses it after surgery, or treat the symptoms of late stage cancer that has spread to other parts of the body.

Adverse effects include:

- hair loss
- mouth sores
- nausea and vomiting
- changes in appetite
- a higher risk of infection
- fatigue
- easy bruising or bleeding

Most adverse effects of chemotherapy disappear after the treatment finishes.

### Targeted Therapy

Various genetic features and changes can affect an individual's risk of cancer. As scientists learn more about the link between different genetic mutations and cancer, they are developing drugs that can target the specific changes that result.

Targeted therapy is a relatively new type of cancer treatment that affects proteins that are involved when specific genetic changes lead to cancer. It is different from chemotherapy as it does not target the whole body.

For example, in some men with breast cancer, there is too much of a protein known as HER2 on the surface of the cancer cells. HER2-positive breast cancers tend to be more aggressive than some other types. Some drugs, such as trastuzumab (Herceptin), appear to slow the progression of cancer by targeting HER2. Mutations in the BRCA genes and other genes also cause protein changes, and targeted therapy may help in these cases, too.

Scientists have identified other genes that affect the course of breast cancer and continue to develop drugs that may improve the outlook for people with these specific changes.

### **Causes**

Experts do not know exactly why cancer develops in the breast, but they have identified a number of risk factors. A common factor appears to be a high level of the female hormone estrogen in relation to androgen. Genetic, environmental, and medical factors can all contribute to this.

<https://www.medicalnewstoday.com/articles/179457.php>

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### **Everyone Needs to Feel Appreciated**

We've all had moments where we felt genuinely appreciated by someone, and their thankfulness not only made our day, but also made us want to work even harder and be even better. But we've also all been in situations where we felt

overlooked and undervalued. Even if the words were there, for whatever reason, the half-hearted “thanks” in passing didn’t really translate as meaningful or sincere. There’s nothing wrong with keeping your gratitude simple. You can say “Thanks,” give an “Atta boy” or share a high five with someone to let them know you appreciate them. But if you really want someone to feel valued and important, there are several things you can do to make sure your appreciation comes across as genuine, heartfelt and authentic.

## Four Ways to Make Someone Feel Appreciated

### 1. Be specific

What are you thankful for? What did they do? The more specific you are, the more genuine you’ll come across. When your spouse picks up some extra chores around the house, rather than just saying, “Thanks for cleaning,” take it even further. “Thank you for folding all of those loads of laundry! I had let it pile up, and you did a ton of work.”

### 2. Include how they helped you

What they did affected you, your company, or the greater good in some way. Be specific. When you include that information in your appreciation, you are recognizing why what they did mattered. For example, if you’re writing a thank-you note for a monetary gift, say more than, “Thank you for the money.” Expound a bit, like: “Thank you so much for your generous gift. We are using the money for a snorkeling excursion on our honeymoon! You are directly contributing to memories we’ll treasure for the rest of our marriage.”

Or instead of just thanking your assistant for taking notes at the last meeting, specify why that helped you. You can say something like, “Thank you for taking notes at the last meeting. Since that meeting, all of us have been able to refer back to them and know exactly what we need to be working on. We’ve made progress so much faster because of it.”

### 3. Make it personal

Say something kind about them as a person and the qualities that they have. This shows that you know them and care about them. Maybe say something like, “You’re so good at handling details, and since that is such a weakness for me, I really admire that about you.”

### 4. State your appreciation

Explicitly stating your appreciation is even stronger than just saying thank you. You can end with something like, “I really appreciate you” or “I really appreciate all of your hard work.” For example, you may not know this, but I have a team of people that help me with my blog posts. I’m going to take this opportunity to give you two real examples of this:

1. Naomi, thank you so much for all of your work on my blog. I know that it takes a lot of your time to run each document through editing, not to mention find images and schedule them all on WordPress each week. Since you’ve joined the team and taken this over for me, it’s given me so much freedom to do what I love the most—write! And of course, you do everything with a smile and an amazing attitude. You are such a joy to work with and I appreciate you very much!
2. Amanda, thank you for all of the time you spend editing my writing. My readers have no idea how incorrect, unpolished, rough and raw my writing is before it gets in your hands. I know finding misspellings and incorrect punctuation may not seem like a big deal to you, but your work enables my

message to get across to the people that need it without any distracting errors. And not to mention—you have the patience of Job! Even when I turn blogs in late every single week, you are so understanding and never make me feel bad. I appreciate all of your hard work so much!

When you're specific and when you include how the person helped you, make a thank-you personal, and state your appreciation for someone, you come across as genuine, heartfelt and authentic—all the while ensuring that the other person truly feels valued and important. Next time you want to show gratitude, resist the urge to just say thanks in passing. Instead, take one extra minute and appreciate them in the strongest way possible.

<https://www.businessboutique.com/2018/03/how-to-make-someone-feel-appreciated/>

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# HEALTHY STARTS HERE

Welcome Summit Education Service Center!

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Your Corporate Membership includes:

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### Healthy Fall Recipes

- [Orange-Ginger Roast Chicken With Fennel and Radicchio Salad](#)
- [Broccoli-Parmesan Chicken Soup](#)
- [Acorn Squash with Brown Rice and Turkey Sausage](#)
- [Kale and Roasted Cauliflower Salad](#)
- [Gingery Chicken & Spinach Stir-Fry](#)

- [Light Chicken Parmesan](#)
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