



BREAST CANCER IS THE MOST COMMON CANCER IN WOMEN

**Tauseef Ahmad, Bibi Nazia Murtaza, Akbar Hussain And
Muhammad Ismail**

Department of Microbiology,
Hazara University Mansehra, Khyber Pakhtunkhwa, Pakistan

Abstract:

The aims of this article is to aware the peoples and update the epidemiology of breast cancer in Pakistan. Breast cancer is the most common in women. It is the second leading cause of death among the women due to cancer and most of the deaths are occurred in the developing countries. In Pakistan the breast cancer is common in young age. One, out of nine Pakistani women suffers from breast cancer and it is the high incidence rate in Asia. In the preparation of this article the help was taken from the available literature downloaded from the internet.

Key words:

Epidemiology, Breast Cancer, Developing Countries, Literature.

Introduction :

Among infectious diseases on the surface of the globe cancer is one of the most leading causes of morbidity and mortality. The breast cancer is the most frequent cause of the death in women worldwide and ranked second cause of death due to cancer¹. The breast cancer is the malignancy of the cell which constitutes the breast tissue. The ductal carcinoma is the common form of the breast cancer and 70-80% originates from the ducts followed by lobular carcinoma 4-5% originates from lobules milk producing glands^{2,3,4}. The breast cancer are affected the male but it is very rare^{5,6,7}. In 2004, 519,000 women are died due to breast cancer and 69% of these deaths were reported in the developing countries¹. In the Pakistan the breast cancer is more common in young age while it is common in old age in the western population. In Pakistan the annual standardized breast cancer rate is 69.1/100,000^{5,8,9}. Out of nine, one Pakistani woman suffer from breast cancer which is one of the most high incidence rates in Asia¹⁰. In breast cancer several histopathological features have prognostic significance include, lymphovascular invasion, oestrogen and progesterone receptor status, tumor grade, proliferation markers and DNA content, peptide hormones, oncogenes, and tumour suppressor genes growth factors and their receptors¹¹. The risk factors associated with breast cancer are age, early menarche, family history, use of combined estrogen and progestin menopausal hormones, alcohol consumption, physical inactivity, accesses to health care center, low socioeconomic status, lack of awareness regarding the disease are the major factors contribute in the spread of the disease¹².

Methodology

The main objectives of this short article is to aware the peoples and update the epidemiology of the breast cancer in Pakistan. And also inform the Government and health department to focus on the prevention and control of the disease. In the preparation of this article the help was taken from the available literatures published in the National journals and International journals downloaded from the internet.

BREAST CANCER IS THE MOST COMMON CANCER IN WOMEN

Total 9 published literatures were studied in which the 3 are irrelevant and were excluded.

Conclusions

Unfortunately the Pakistan is a developing country and according to available literature the breast cancer is too much high in Pakistan than the other Asian countries. The Government of Pakistan spend low budget both on health and education. The Global Competitiveness Index (GCI) stated that the performance of Pakistan both in health and education is weak when it is compared with the other countries in the region India, Bangladesh, Sri Lanka, China and Malaysia¹³. In Pakistan the 75% population are living below the line of poverty which alarming for health. Most of the cancer patients cannot afford the treatment and as a result they loss their life. For the control of breast cancer the sufficient knowledge regarding the risk factors and screening modalities is very essential. The Government and Health care department need to focus on the disease. If the proper management is not done for the prevention and control of the disease it may lead to affect the whole population.

Competing interest

The author declares that they have no competing interest.

References

- 1.WHO (2008) The Global Burden of Disease : 2004 Available from:www. who. int /healthinfo /global_burden_disease/2004_report
- 2.Naeem M, Khan N, Aman Z, et al (2008). Breast cancer: experience at lady reading hospital, Peshawar. J Ayub Med Coll, 20, 22-5.
- 3.Ludwig J (2008) Personalized therapy of sarcomas: integration of biomarkers for improved diagnosis, prognosis, and therapy selection. Curr Oncol Rep, 10, 329-37.
- 4.Meijers-Heijboer H, Ouweland A, Klijn J, et al (2002). Low penetrance familial carcinoma susceptiblness attributable to CHK2 1100delC in non-carriers of BRCA1 or BRCA2 mutations. Nature genetic science, 31, 55-9.
- 5.McPherson K, Steel C M, Dixon J M, (2000). Breast cancer— epidemiology, risk factors and genetics. BMJ, 321, 624-8.
- 6.Ahmed F, Mahmud S, Hatcher J, Khan SM (2006) Breast cancer risk factor knowledge among nurses in teaching hospitals of Karachi, Pakistan: a cross sectional study. BMC Nursing, 5, 6.
- 7.World Cancer Report". (2008) International Agency for Research on Cancer. http://www.iarc.fr/en/publications/pdfs-online/wcr/2008/wcr_2008.pdf. Retrieved 2011-02-26.
- 8.Mahmood S, Rana TF, Ahmad M (2006). Common determinants of Ca Breast—a case control study in Lahore. Ann King Edward Med Coll, 12, 227-8.
- 9.Banning, Maggi, Haroon Hafeez, et al (2009). The Impact of culture and social science and psychological problems on muslim patients with carcinoma in Pakistan. Cancer Nursing, 32, 1-8.
- 10.Sohail S, Alam SN (2007) Breast cancer in Pakistan—awareness and early detection. J Coll Physicians Surg Pak, 17, 711-2.
- 11.Alahwal MS (2006). HER-2 positivism and correlations with alternative histopathologic options in carcinoma patients— hospital based mostly study. J Pak Master of Education Assoc, 56, 65-8.
- 12.Aziz Z, Sara S, Akram M, Saeed A (2004). Socioeconomic status and breast cancer survival in Pakistani women. J Pak Med Assoc, 54, 448-53.
13. DIY HDI: Build Your Own Index: <http://hdr.undp.org/en/data/build/>