

conferenceseries.com 680th Conference

2nd World Congress on

Breast Cancer

September 19-21, 2016 Phoenix, USA

Keynote Forum (Day 1)



Breast Cancer Congress 2016

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Shahla Masood

University of Florida College of Medicine – Jacksonville, USA

Why the term of low-grade ductal carcinoma in situ should be abandoned: minimizing over diagnosis and overtreatment

During the last several years, increased public awareness, advances in breast imaging and enhanced screening programs have led to early breast cancer detection and attention to cancer prevention. The numbers of image-detected biopsies have increased and pathologists are expected to provide more information with smaller tissue samples. These biopsies have resulted in detection of increasing numbers of high-risk proliferative breast disease and in situ cancers. The general hypothesis is that some forms of breast cancers may arise from established forms of ductal carcinoma in situ (DCIS) and atypical ductal hyperplasia (ADH) and possibly from more common forms of ductal hyperplasia. However, this is an oversimplification of a very complex process, given the fact that the majority of breast cancers appears to arise de-novo or from a yet unknown precursor lesion. Currently, ADH and DCIS are considered as morphologic risk factors and precursor lesions for breast cancer. However, morphologic distinction between these two entities has remained a real issue that continues to lead to over-diagnosis and overtreatment. Aside from morphologic similarities between ADH and low grade DCIS, biomarker studies and molecular genetic testing's have shown that morphologic overlaps are reflected at the molecular levels and raise questions about the validity of separating these two entities. It is hoped that as we better understand the genetic basis of these entities in relation to ultimate patient outcome, the suggested use of the term "Borderline Breast Disease" can minimize the number of patients who are subject to over treatment.

Biography

Shahla Masood, M.D. is an professor in the department of Pathology and Laboratory Medicine at the University of Florida College of Medicine–Jacksonville. She is Chair, Department of Pathology and Laboratory Medicine; Program Director, Breast Pathology Fellowship; Medical Director, Breast Health Center; Program Director, Cytopathology Fellowship; Director of Research. Clinical Special Interests: Breast pathology, cytopathology. Research Special Interests: Early breast cancer detection; use of minimally invasive procedures to provide optimal samples for analysis; prognostic/predictive index.

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Colleen Huber

Naturopathic Oncology Research Institute, USA

Breast cancer survivors' choices in treatment and diet

In this study we followed breast cancer survivors up to 7 years following initial encounter in a naturopathic clinic. Most survivors had surgical resection of their entire tumor burden, followed by at least 36 intravenous nutrient treatments, administered under the medical direction of the author. Some of those in remission chose to return for follow-up intravenous nutrients once per month after they were observed to achieve remission from their cancers. We compare this group with those who had the intravenous nutrients without any surgery, as well as those who had the surgery plus IV nutrients, plus chemotherapy. We compare the different cohorts for survival, treatment choices, disease status, current dietary habits and self-reported quality of life. Comparison is also made among those whose initial diagnosis was Stage I, II, III or IV. We examine in particular detail the diet and lifestyle of the cancer survivors. 97 total cancer survivors responded fully and promptly to detailed questionnaires, in which they indicated whether they had 3 times or more per week items from a long list of foods and beverages, and whether they exercised. 37 of those were breast cancer patients. We compare the diets and lifestyles of those in remission versus those who continue to suffer from breast cancer.

Biography

Colleen Huber NMD is a Naturopathic Medical Doctor in Tempe, Arizona. She is President of the Naturopathic Cancer Society. She is a Naturopathic Oncologist and Fellow of the Naturopathic Oncology Research Institute. Her writing includes her book, Choose Your Foods Like Your Life Depends On Them, and she has been featured in the Defeat Cancer book. She authored the largest and longest study in medical history on sugar intake in cancer patients, which was reported in media around the world in 2014. Her academic writing has appeared in The Lancet and Cancer Strategies Journal, and other medical journals.

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Lei Huo

The University of Texas MD Anderson Cancer Center, USA

MicroRNA expression profiling to identify potential biomarkers in inflammatory breast cancer

Inflammatory breast cancer is characterized by clinical hallmarks of diffuse erythema and edema (peau d'orange) involving one third or more of the breast skin caused by tumor emboli blocking dermal lymphatics, and rapid progression from the onset of the disease. It is the most aggressive form of breast cancer, comprising 1-5% of newly diagnosed breast cancer in the United States. The survival outcomes of patients with inflammatory breast cancer are poor with standard therapy. There is an urgent need for new therapeutic targets. At the molecular level, the few published mRNA expression profiling studies have indicated that transcriptional heterogeneity exists in inflammatory breast cancer as extensively as in non-inflammatory breast cancer. Recent advances have implicated the role of microRNA as oncogenes or tumor suppressor genes in tumorigenesis, metastasis and response to treatment in various cancer types including breast cancer. In our recent study, the microRNA expression profiles of 23 inflammatory breast cancer, 24 non-inflammatory advanced breast cancer and 12 normal breast tissue fresh frozen samples were generated using a previously validated microRNA microarray assay. Among the differentially expressed microRNAs, microRNA-205 expression was decreased not only in tumor compared with normal breast tissue, but also in inflammatory breast cancer compared with non-inflammatory breast cancer. Lower expression of microRNA-205 correlated with worse distant metastasis-free survival and overall survival in our cohort. Thus, microRNA-205 may serve as a therapeutic target in advanced breast cancer including inflammatory breast cancer.

Biography

Lei Huo received her Bachelor of Medicine degree at Beijing Medical University and her PhD in Molecular Biology and Genetics at Northwestern University, Chicago. A practicing breast pathologist in MD Anderson Cancer Center, she is actively involved in clinical and translational research in the field of breast cancer. Her research interests include molecular and immune-histochemical markers in the diagnosis and treatment of breast cancer, among others.

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Chintamani

Safdarjang Hospital, India

Quality assurance in surgery for breast cancer- have we finally arrived?

Management of breast cancer arguably the commonest cancer of mankind has indeed undergone a tremendous evolution in the last few decades. While there are variations in the presentation and behavior of this cancer, there is few accepted common management strategies that have been adopted world over. Till such time that we have completely reliable and rock solid guidelines there would be regional variations in the management and outcome of this dreaded but curable cancer. The management approaches would also vary depending on the availability of healthcare resources and proper investigational and management facilities. The management would therefore need to be tailored to the centre, the patient and also the expertise available. While there are no issues with these modalities being available in the developed world, there are problems in the developing world, although one can find some of these countries as healthcare paradoxes i. e. at one end there are centers of excellence and at the other end there are issues relating to providing primary health care and management of certain basic health problems like communicable diseases. There is thus no uniformity in the management of breast cancer across centers and countries. Quality assurance has to be ensured in order to achieve acceptable and reproducible outcomes in the management of breast cancer across the globe.

Biography

Chintamani specializes in oncosurgery. He is the President of Association of Breast Surgeons of India and the Governing council member of Association of Surgeons of India. He is a tutor and examiner at Royal College of Surgeons of Edinburgh, UK.

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