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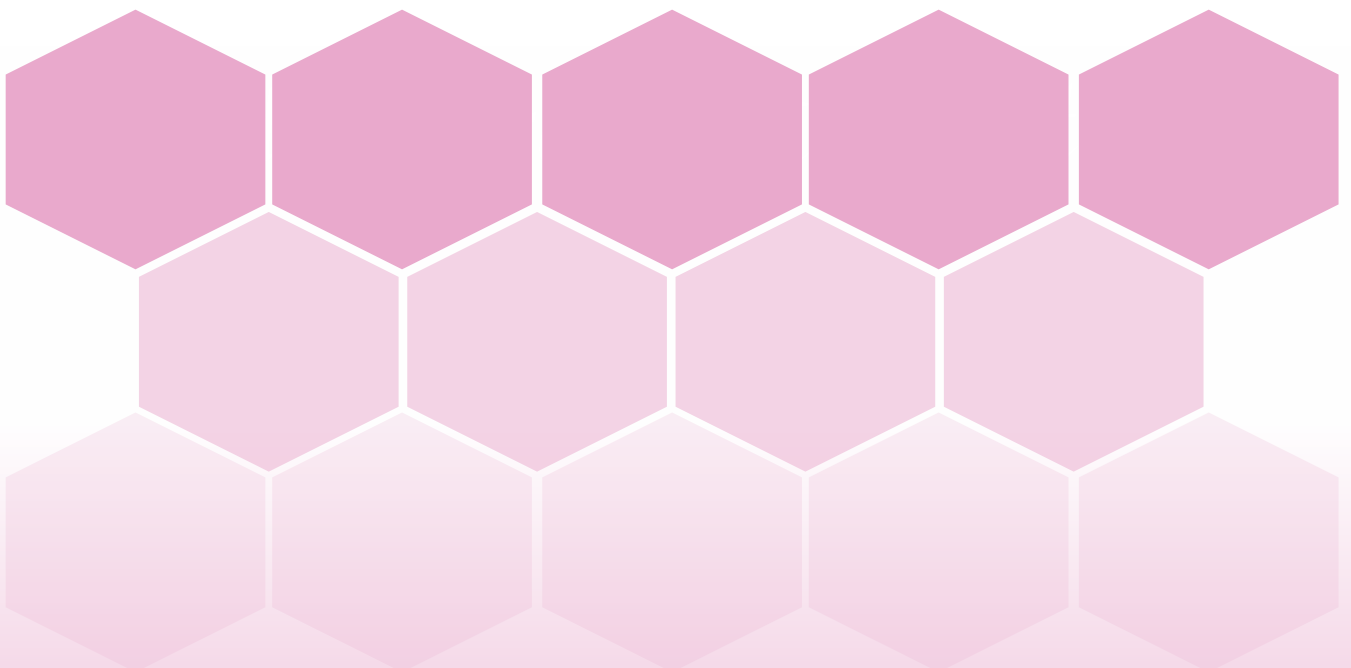
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4<sup>th</sup> World Congress on

# Breast Cancer

May 08-10, 2017 Singapore

## Posters



4<sup>th</sup> World Congress on

# BREAST CANCER

May 08-10, 2017 Singapore

## Staging distribution and choice of therapeutic management in patients with breast cancer in 2016 at the Breast Unit, University Hospital Tzaritza Joanna – ISUL, Medical University of Sofia, Bulgaria

T Sedloev, M Koleva, T Pirdopska, I Terziev, S Usheva, Ts Spiridonova, J Spiridonov, V Tihchev, I Gabrovski, S Kovacheva and B Korukov  
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**Introduction:** The incidence of breast cancer (BC) in Bulgaria is lower than the average in Europe (76.3 out of 100 000 females to average in Europe 94.2/100 000 females). The data from Bulgarian National Cancer Registry for the last 40 years shows continuous growth in the number of newly diagnosed cases – from 1632 patients in 1976 to 4000 in 2014. The staging distribution for 2013 is the following: stage I (A, B) – 29%, stage II (A, B) – 42 %, stage III (A, B, C) – 20 %, stage IV – 5 %, unclassified – 4%.

**Purpose:** The purpose of this study is to analyze the choice of therapeutic management in patients with BC, diagnosed and treated at the Breast Unit, University Hospital "Tzaritza Joanna – ISUL", Medical University (MU) of Sofia in 2016 according to the stage of the disease.

**Materials and method:** All patients, diagnosed with BC were staged according to the TNM- classification (8<sup>th</sup> edition). The University of Southern California/Van Nuys Prognostic Index (USC/VNPI), the Memorial Sloan-Kettering Cancer Center (MSKCC) nomogram and Medical University Sofia (MUS) prognostic model for evaluating the probability of local recurrence were used in determining the treatment options for patients with non-invasive form of BC (DCIS). The selection of patients with early breast cancer, suitable for breast-conserving surgery (BCS) with simultaneous intraoperative radiotherapy (IORT), was accomplished according to The Groupe Européen de Curiothérapie-European Society for Therapeutic Radiology and Oncology (GEC-ESTRO) Breast Cancer Working Group (2009) criteria. SPECT/CT was the preferred method for a preoperative mapping of sentinel lymph nodes, followed by intraoperative detection with Europad Gamma Probe camera. We used the INTRABEAM® system (Carl Zeiss Surgical GmbH, Oberkochen, Germany) to complete the process.

**Result:** In 2016 386 BC patients were treated at our Breast Unit. The mean age of the group of 136 newly diagnosed cases (132 females and 5 males) is 59,2 (29-91). Invasive ductal carcinoma was the most frequent finding (76%) and invasive lobular carcinoma occurs in 16 % of all cases. We had one male patient with malignant fibrous histiocytoma of the breast.

**Conclusion:** Important factors for successful results are the modern complex treatment, which requires individualized approach, and the consecutive modules in standard limits that we provide. The role and advantages of the specialized structures (Breast Units) are undeniable, since they ensure the highest level of diagnosis and treatment, i.e. for the past year at our Breast Unit newly-diagnosed patients were 33% without a single patient with unclear stage. Nationally these numbers are 29% and 4%, respectively.

### Biography

Theophil Sedloev MD, PhD is a chief of the Breast Unit at the Department of Surgery, Medical University Sofia, Bulgaria. His professional interests include surgical treatment of breast cancer - breast conserving and oncoplastic surgery with intraoperative radiotherapy for early breast cancer, neoadjuvant chemotherapy and surgery of locally advanced breast cancer.

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## BREAST CANCER

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**The use of complementary and alternative medicine in pregnancy preparation among women with breast cancer in Taiwan**Sheng-Miauh Huang<sup>5</sup> Ping-Ho Chen<sup>1</sup>, Jerry Cheng-Yen Lai<sup>2</sup>, Chen-Jei Tai<sup>1</sup>, Li-Yin Chien<sup>3</sup> and Hsueh-Wen Chung<sup>4</sup><sup>5</sup>Mackay Medical College, Taiwan<sup>1</sup>Taipei Medical University Hospital, Taiwan<sup>2</sup>Institute of Public Health, Taiwan<sup>3</sup>Institute of Community Health Care, Taiwan<sup>4</sup>National Yang-Ming University, Taiwan

**Background:** Previous evidences indicated that female cancer patients suffered from infertility after cancer-related treatment. Use of complementary and alternative medicine (CAM), particularly traditional Chinese medicine (TCM) and natural products, in pregnancy preparation and fertility management is becoming increasingly common in Taiwan.

**Objective:** The study purposes are to describe the use of CAM among breast cancer women after cancer-related treatment in pregnancy preparation in Taiwan and to examine factors associated with the use of CAM.

**Methods:** Reproductive-age (20-49 years old) women with breast cancer after cancer-related treatment between January 2011 and December 2014 in a Taiwan city participated in the study. Interview was completed with 178 (62%) of those 287 eligible, asking about sociodemographic variables, disease/treatment characteristics, and the use of CAM.

**Results:** The CAM was used after cancer-related treatment by 8.4% of women with breast cancer. Approximately one-quarter (25.7%) of those women ever used CAM to increase the probability of pregnancy. The TCM was the most popular option (24.6%). Age was significantly different between CAM users and those who did not use CAM. The result of binary logistic regression showed that younger women less than 40 years old was the key predictor for using CAM when considering pregnancy (OR = 1.47; 95% CI: 1.84, 10.22).

**Conclusions:** This study found that younger women with breast cancer would search CAM, especially for TCM, to prepare pregnancy in Taiwan. Health providers should help them to choose safe TCM and increase the quality of cancer and pregnancy care.

**Biography**

Sheng-Miauh Huang has completed her PhD at the age of 35 years from National Yang-Ming University, Taipei, Taiwan. She is the assistant professor at the department of nursing, Mackay Medical College in Taiwan. She has published more than 20 papers in reputed journals, especially for cancer care.

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# BREAST CANCER

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## Breastfeeding experiences of Taiwanese mothers of infants with neonatal jaundice in a baby-friendly hospital environment

Kuei-Hui Chu<sup>1</sup> and Li-Yin Chien<sup>2</sup><sup>1</sup>Ching-Kuo Institute of Management and Health, Taiwan<sup>2</sup>National Yang-Ming University, Taiwan

**Background:** The rise in the breastfeeding rate comes with an increase in the prevalence of neonatal jaundice in ethnic Chinese babies.

**Objective:** The objective of this study was to explore the breastfeeding experiences of mothers of infants with neonatal jaundice.

**Method:** In-depth qualitative interviews and content analysis were conducted with nine mothers of newborns with neonatal jaundice and breastfed their babies during the first year postpartum.

**Results:** Mothers' experiences can be described in four phases and six themes. (1) Prenatal stage: Build breastfeeding belief, i.e., breastfeeding is best and a natural behavior, without awareness of neonatal jaundice; (2) Stage after neonatal jaundice started to appear: Including two themes, questioning beliefs in breastfeeding and happiness about being a mother. Mothers lacked knowledge and ignored the threat of neonatal jaundice, mainly focused on their physical discomforts and worrisome about insufficient breast milk, they also felt an intimate mother-infant bond through breastfeeding; (3) Stage when newborns had neonatal jaundice: Including two themes, neonatal jaundice and phototherapy caused negative emotions and regaining original beliefs about breastfeeding. They struggled through emotional swings and inconsistent advices about whether phototherapy and formula supplementation is needed. Then they decided neonatal jaundice is only temporary then retrieved initial beliefs of breastfeeding; (4) Stage after neonatal jaundice faded and mothers continued breastfeeding: Insist and adapt.

**Conclusions:** When their babies had neonatal jaundice, women experienced physical discomfort, external pressures and negative emotions concurrently. It is essential for health professionals to provide assistance and for family to provide support during this time.

### Biography

Kuei-Hui Chu has completed her PhD from National Yang-Ming University. Her professional interests include women's health, child health and neonatal care.

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**Clinicopathological and prognostic value of programmed death ligand-1 (PD-L1) in breast cancer: A meta-analysis**Guochao Zhang<sup>1</sup>, Xue Qi<sup>1</sup>, Likun Huang<sup>2</sup><sup>1</sup>Chinese Academy of Medical Sciences and Peking Union Medical College, China<sup>2</sup>Shanxi Provincial People's hospital, China

**Background:** Programmed death ligand-1 (PD-L1) is an immunological checkpoint protein that has recently been found to be associated with the prognosis of various malignancies. However, the association between PD-L1 expression and the survival of breast cancer patients has remained unclear. Therefore, the aim of the present meta-analysis was to assess the clinical value of PD-L1 in breast cancer patients.

**Methods:** MEDLINE/PubMed, EMBASE, Cochrane Library, and Grey Literature databases were searched up to 30 March 2016 for articles involving an association between PD-L1 expression and breast cancer prognosis. Hazard ratios for overall survival with 95% confidence intervals (CIs) according to the expression status of PD-L1 were calculated. Odds ratios (ORs) were also analyzed to evaluate the association between clinicopathological parameters and PD-L1 expression.

**Results:** Ten studies were included in this meta-analysis and 7 of these described clinicopathological features. Elevated levels of PD-L1 were only significantly associated with histological grade (OR = 1.86, 95% CI: 1.38–2.51;  $P_{\text{heterogeneity}} = 0.0196$ ), estrogen receptor status (ER) (OR = 0.36, 95% CI: 0.17–0.75;  $P_{\text{heterogeneity}} = 0.000$ ), and progesterone receptor status (PR) (OR = 0.31, 95% CI: 0.11–0.86;  $P_{\text{heterogeneity}} = 0.000$ ).

**Conclusion:** There were trends observed in the present meta-analysis, although PD-L1 status as a predictor of prognosis for patients with breast cancer could not be confirmed. Therefore, further studies of mechanism(s) related to PD-L1 expression level and immune escape and antitumor immune responses are needed, especially in relation to breast cancer subtypes. Furthermore, an evaluation standard for PD-L1 expression would facilitate all future studies.

**Biography**

Zhang Guochao is working as a resident for the second year in Peking Union Medical College and Hospital at present.

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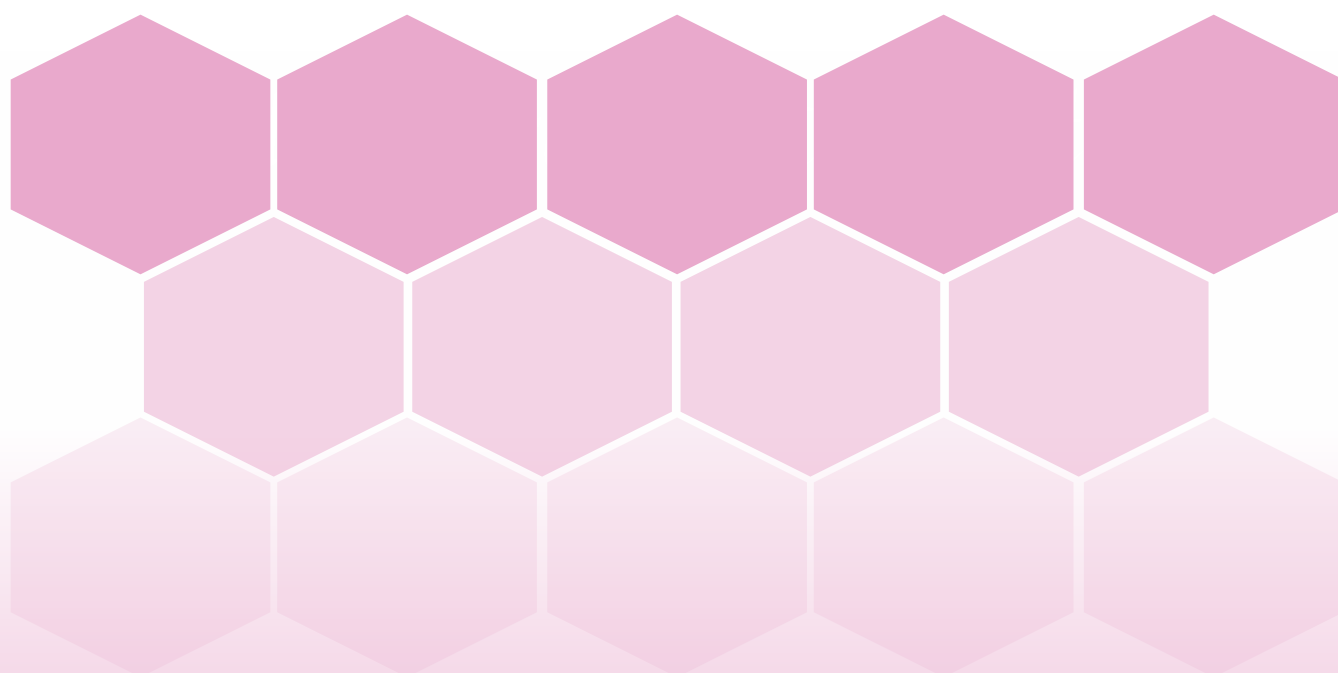
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## Accepted Abstracts



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# BREAST CANCER

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## **Oncoplastic surgical procedures: Techniques that should be tailored to fit a particular patient**

**Ahmed Tarek Awad**

University of Alexandria, Egypt

Oncoplastic surgery is the application of plastic surgical techniques to help excision of malignant breast masses and remodel the breast after that to get an acceptable cosmetic outcome. It greatly extended the indications of breast conservative surgery and overcame the long term side effects of traditional conservative surgery. In this study the author presents the experience with different oncoplastic surgical procedures applied to breast cancer patients in the Surgical Oncology unit, Faculty of medicine, University of Alexandria. Factors affecting the selection of each technique will be discussed. The limitations of the techniques, cosmetic outcome and the complications will be demonstrated.

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# BREAST CANCER

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## Epidemiologic patterns of breast cancer in Northern Saudi Arabia

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<sup>1</sup>University of Hail, KSA

<sup>2</sup>King Khalid Hospital, KSA

**Objective:** The aim of this study was to find out the prevalence rates of common types of breast cancer in Northern Saudi Arabia.

**Methodology:** A retrospective cohort study was carried out over a five year period in two referral hospitals. In this study 257 files were retrieved from departments of Surgery from different hospitals in Hail region, Kingdom of Saudi Arabia (KSA).

**Results:** Of the 257 samples diagnosed using Fine Needle Aspiration Cytology (FNAC), histopathological diagnosis was confirmed for 158 patients. Of the 158 diagnosed samples, 46/158 (23.2%) were ductal carcinoma, 7/158(4.4%) were lobular carcinoma, 3/158(1.9%) were mixed tumors, and 102/158(64.6%) were fibroadenoma.

**Conclusion:** Ductal carcinoma is the prevalent breast cancer in Hail, KSA.

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## Knowledge attitude and practices on breast self-examination for breast cancer among women in Tigray region, Northern Ethiopia

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Ethiopia

**Introduction:** Global burden of cancer cases and deaths is rising from time to time. Breast cancer is one of the leading causes of cancer related morbidity and deaths in women. The trend of cases and deaths attributed to these cancer types is sharply rising in developing countries including Ethiopia. Increased awareness and healthy behaviors appeared to reduce the incidence of this jeopardy. A little is known about breast cancer knowledge, attitude and behavior in Tigray. The aim of this study was to assess the knowledge, attitude and practices of breast cancer in relation to screening practices to design appropriate awareness raising practices to enhance preventive measures.

**Methods:** A descriptive cross-sectional community based survey was conducted in Kilde-Awlaelo health and demographic surveillance survey sites and Mekelle town. This was undertaken as part of the wider WHO steps wise survey in the two settings. Data were collected in January 2014. A total of 1,433 women in the age group 25-64 years old were included. Face to face interview was employed to gather data from individual respondents. Poor knowledge or no knowledge was defined as woman who does not have any information regarding the risk factors of breast cancer its consequences and screening of breast cancer or who heard only the terms but without any further information. Data were entered to EPI data software and exported to SPSS version 20 to carryout descriptive and analytical statistics. Significant statistical association between the outcome and explanatory variables was declared using odds ratio and corresponding 95% confidence interval. The findings were presented using tables and figures

**Results:** The median age of the study participants was 31 year (ranged from 25-64 year). 739 (52.5%) were married or cohabiting at the time of the study. Majority (86.7%) of the study participants had no information or only heard the term breast cancer. 441 (34.9%) reported they did not have the worry that breast cancer could affect their families. Most (79.4%) did not know how to examine their breasts. About 80.5% of the women did not practice breast self-examination. Most (90.2%) did not have breast examination by a health worker. The predictors of practicing self-breast examination after adjusting for potential confounders were being a resident of Kilde Awlaelo 0.57(0.33-0.98), age group 25-34, 35-44 and 45-54 had 3.0(1.13-7.93), 3.07(1.14-8.26) 3.03(1.04-8.89) respectively, being government employee, NGO employee, self-employed, housewife and farmer 0.07 (.024-.22), 0.14 (0.03-0.62), 0.20 (0.08-0.48), 0.40 (0.16-0.95) and 1.17 (0.05-0.55) respectively, knowing nothing at all and knowing only the term 0.11 (0.03-0.39) and 0.29 (0.09-0.92) respectively, who worried sometimes 2.97 (1.61-5.48) and those women who had physical examination of their breasts by a health worker 9.70 (4.96-18.98).

**Conclusions & Recommendations:** The knowledge status of the study participants on breast cancer was very low. Negative attitudes were high. Practices of breast self-examination and examination by a health worker were far below expectation. Knowledge status about breast cancer, previous exposure to health worker and some socio economic conditions were found to be predictors of breast self-examination. Basic information on breast cancer has to be imparted using appropriate channels of communication. Health facilities should also provide relevant information and support to women on breast cancer information.

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# BREAST CANCER

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## Ethics and informed consent: What breast cancer patients want to know

**Janet maker**

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When I was diagnosed in 2011, like most people, I knew almost nothing about breast cancer. I imagined that my doctors would work with me as a team to help me figure out the treatment choices that were best for me. However, I quickly found out that this is not how oncology works in the U.S. Oncologists follow a standard of care consisting of some combination of surgery, chemotherapy, radiation, and hormones. The for-profit system of medicine in the U.S. rewards doctors for seeing a lot of patients in a short time, so unless I was a relative or a VIP, I was not going to get more than the standard of care. The problem was that I didn't feel safe with the standard of care. I needed to find out for myself all the treatment options, the statistical outcomes for each option, and all the side effects before I felt comfortable making treatment decisions. When I asked my questions, I got incomplete and often conflicting answers from different doctors, and I didn't feel that I had enough information to make good decisions. I scrambled for whatever information I could find from other patients and in the literature, and I found a great deal that cancer patients are frequently not aware of. Each patient must weigh the expected benefits of treatments against the possible harms and come up with her own decisions, but she will not be able to do this without solid information. In cases where the data are controversial, I believe that doctors should present the controversies and allow patients to make their own decisions, rather than making decisions on their patients' behalf. Some patients will prefer to follow their doctors' advice rather than making their own decisions, but I believe the information should at least be offered. My presentation will focus on essential information that I uncovered in my own research which breast cancer patients are rarely, if ever, told. I will discuss key points related to Surgery, Chemotherapy, Radiation, and Remission Maintenance.

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## Expression of D2-40 in benign and malignant breast lesions and study the correlation between lymphovascular density and other prognostic factors of breast cancer

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**Background:** D2-40 is a mouse monoclonal antibody specific for human podoplanin and has been used in identifying lymphovascular invasion (LVI) of tumors also its expression has been used as a marker for myoepithelial cells (MEC) of breast. Lymphangiogenesis, assessed as lymphovascular density (LVD), is the initial step of generalized tumor lymphovascular invasion (LVI). It also involves VEGF-C as the most important protein family. Lymphangiogenesis among breast cancer cases correlates with several clinicopathological factors are important to determine prognosis and treatment strategies, but results have been controversial and require clarification.

**Aim:** The aim of this work is to explore the expression of D2-40 as a marker for myoepithelial cells (MECs) of the breast lesions, to investigate the clinicopathological significance of VEGF-C, D2-40 expression and lymphovascular density (LVD) in breast cancer patients.

**Methods:** Sections from 88 paraffin-embedded archival specimens of breast lesions were selected to include benign breast lesions as fibrocystic changes of the breast and ductal hyperplasia (15 cases) and invasive breast cancer (73 cases). Immunohistochemistry (IHC) for D2-40, calponin and VEGF-C were performed and IHC staining results and the associations of intratumoral and peritumoral LVD were correlated with clinicopathological features and prognosis were assessed.

**Results:** D2-40 highlighted the MECs of benign breast lesions beside its identified lymphatic vessels and LVI in breast carcinomas. VEGF-C expression was significantly higher in invasive breast cancer than benign breast lesions ( $p < 0.01$ ). VEGF-C ( $p < 0.001$ ) expression was significantly associated with peritumoral LVD, but not intratumoral LVD. VEGF-C expression, peritumoral LVD and LVI were significantly associated with lymph node metastasis ( $p = 0.025$ ,  $p = 0.006$  and  $p = 0.017$ , respectively). Moreover, peritumoral LVD was an independent risk factor for axillary lymph node metastasis, disease-free survival in multivariate analysis.

**Conclusions:** Our results show that D2-40 is a reliable marker highlights MECs in benign breast lesions beside it is a useful tool for identification of LVI in breast carcinomas which is reflecting a potential for lymphatic metastatic spread and possible poor prognosis. Our study also demonstrated that high expression of VEGF-C in invasive breast carcinoma may induce lymphangiogenesis in the peritumoral area. Peritumoral LVD appeared to be a potential independent prognostic factor in breast cancer patients.

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## Factors affecting survival of women with breast cancer in King Fahad Medical City, Saudi Arabia

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**Background:** Breast cancer is the most frequently diagnosed cancer among women in 140 of 184 countries worldwide. The association between breast cancer survival and socio-demographic and pathologic factors has been widely studied in the developed countries. But scarce data is available from Saudi Arabia. We aimed to determine the overall observed one year and three years survival rate of female breast cancer patients and to investigate the factors affecting survival rate.

**Methods:** Retrospective data was collected from the cancer centre registry at King Fahad Medical City (KFMC) that included all women diagnosed with breast cancer between 1st January 2011 till 31<sup>st</sup> December 2012 and were followed to 31<sup>st</sup> December 2015 (cut off point for follow-up). Kaplan-Meier analysis was done to assess overall survival. The factors affecting survival rate such as age, histological type, tumor grade at diagnosis, metastases and treatment options were investigated using log rank test and Cox regression analysis.

**Result:** The overall observed survival probability of the study population at 1, and 3 years was 95%, and 85%, respectively. The 3 year survivals for the younger ( $\leq 40$  years), 41-50 years and older (50+ years) patients were 83.9%, 90.6% and 80.6% respectively, the differences not reaching statistical significance. There were statistically significant associations between three year survival and histological type of tumour, laterality, metastases and type of treatment by the univariate analysis log rank test.

**Conclusion:** One and three-year survival rate of breast cancer at KFMC was 96% and 85% respectively. Investigating the factors affecting survival rate is one of the most essential means of improving cancer prognosis.

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## Breast textiloma: An unending medico-legal issue

Mohamed Amin Mesrati<sup>1</sup>, Marwa Boussaid<sup>1</sup>, Rania Jouirou<sup>1</sup>, Nouha Abdejilil<sup>2</sup>, Abdelfeteh Zakhama<sup>2</sup>, Ali Chadly<sup>2</sup> and Abir Aissaoui<sup>1</sup><sup>1</sup>Taher Sfar Hospital, North Africa<sup>2</sup>Fattouma Bourguiba Hospital, North Africa

**Introduction:** Textiloma is a mass composed of retained surgical textile foreign body. It is a rare iatrogenic complication. The most common cases occur after abdominal or thoracic surgery but rarely after breast surgery. It is a frequently injurious situation that can lead to medico-legal implications. It is considered to be a sample of medical negligence that involves the surgeon responsibility. It is a preventable condition and it can be avoidable by maintaining standard recommendations.

**Case Report:** A 47-year-old lady, without past medical history, was diagnosed with a breast infiltrating intraductal carcinoma. She was treated with mastectomy and adjuvant chemo radiotherapies. Four years later, the patient consulted her surgeon for a subcutaneous mass in the operative site. The physical examination found a palpable hard painless mass near the surgical scar. Ultrasonography showed a heterogenous mass. Both medical and radiological investigations concluded to recurrent tumor. The patient has undergone surgery. Macroscopic exploration revealed an adherent whitish mass, measuring 5x5 cm with sclerotic consistency. The section showed a sponge. The histological examination confirmed the diagnosis of textiloma and noted granulomatous inflammation with multinucleated foreign body type of giant cell infiltration around textile fibers.

**Conclusion:** The medico-legal implications of textiloma are high and significant. In fact, the doctor can be made liable in civil law for paying compensation and in criminal law if the degree of negligence is so gross. However, in spite of continual improvement in surgical procedures and the technical evolution aimed at protecting patients in the operating room, textiloma is unlikely to be completely eliminated.

### Biography

Mohamed Amin Mesrati is a Forensic Doctor and an Associate Professor, graduated from Faculty of Medicine of Monastir (Tunisia). He is devoting his life in defending people rights and improving the health system. He is dividing his time between teaching, researches, performing autopsies and examining victims of violence.

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# BREAST CANCER

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## Role of post mastectomy radiotherapy in T1,T2 lesions with 1-3 positive axillary lymph nodes- A retrospective study of 101 cases

**Nikhil Garg**

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**Introduction:** Post mastectomy radiotherapy (PMRT) reduces loco-regional recurrence (LRR) and improves overall survival, there is international consensus to recommend PMRT for patients with tumour size more than 5 cm (T3), tumour invasion of the skin, pectoral muscle or chest wall (T4) and patients with >4 positive lymph nodes (LN). However, the role of PMRT for patients with T1, T2 disease with 1-3 positive LN is still controversial. The side effects of radiotherapy and its associated morbidity have to be considered in the risk benefit ratio, thus difficult to arrive at consensus in early breast cancer. In a developing country like India, factors such as patient education, level of awareness, financial aspect, long term follow up, limitation of resources have to be balanced and tailored according to the indication and need of the patient.

**Objectives:** The objective of this study is to empirically explore whether it is advisable to carry out radiation when there are 1-3 nodes and whether perinodal extension in this subgroup is an important parameter to consider for radiotherapy.

**Material and Methods:** We have collected data after approval from our institutional board review committee and analysed case files of patients who presented and were treated at our governmental tertiary referral centre from a period between 2012-2015. Of the 691 patients who underwent mastectomy, we short listed 101 cases for our study who fulfilled our basic inclusion criteria of T1,2 N1 on final histopathology. The inclusion criteria for this analysis were: (1) Female patients with unilateral breast cancer and no distant metastasis at initial diagnosis who underwent mastectomy and axillary lymph node dissection, (2) postoperative pathology indicated T1-2 and 1-3 positive axillary lymph nodes (T1-2N1M0) disease, at least 10 lymph nodes removed by axillary dissection, (3) complete surgical resection of the tumor and negative margins, (4) complete estrogen receptor (ER), progesterone receptor (PR) and human epithelial growth factor receptor family 2 (Her2) status and (5) No neoadjuvant chemotherapy was administered before surgery and endocrine therapy was performed based on the hormone receptor status. In order to study the research questions, we formulated hypotheses as follows: Radiotherapy does not have any impact on recurrence post mastectomy, there is no influence of peri nodal extension on recurrence. The above hypotheses were tested using chi-square test.

**Results:** On applying chi square test we found out the observed and the expected value radiotherapy was given in 60 patients and 41 were not given. Recurrences were obtained in 9 amongst radiotherapy and without radiotherapy in 16. When chi square was applied with 1 degree of freedom, the value was highly significant at 0.006 with 99% CI. Hence our hypothesis was rejected. Also in case of PNE with recurrence and radiotherapy, 8 had PNE with radiotherapy and recurrence and 27 had no recurrence, on computation degree of freedom was 3 and p value was 0.013% hence highly significant.

**Conclusions:** Radiotherapy should be strongly considered in patients with 1-3 nodes post mastectomy as it decreases the chances of recurrence and also if PNE is present chances of recurrence are increased, hence radiotherapy can be considered.

### Biography

Nikhil Garg has completed his Masters in Surgery in 2015. At present he is pursuing MCh Surgical Oncology at a premier institute in India, Gujarat Cancer and Research Institute, Ahmedabad. He has been a National Faculty and has been teaching surgery to post graduation aspirants. He has also authored one book of surgery MCQ questions.

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## Perceived maternal role competence among mothers of infant residing in Pokhara, Kaski, Nepal

**Gurung Nirsuba**

Chitwan Medical College, Nepal

Mothers do not naturally adapt to their maternal role performance during early postpartum period but they need to learn and adjust continuously. They must use their potential and strength to adapt with changing role. Mothers, who are able to cope successfully in transition to motherhood, will gain mastery in their maternal role performance including role competence in infant care, relation with infant and satisfaction in their maternal role. The investigator conducted this study that would be helpful in determining the factors related to maternal role competence during the transition to motherhood and its effect on infant outcome. A descriptive cross sectional research design was used to conduct the study aimed to find our perceived maternal role competence among mothers of infants residing in Pokhara. A total 185 mothers of infant were selected by simple random sampling technique. Standard tool "Parenting sense of competence" was used to assess perceived maternal role competence. The data were analyzed with descriptive and inferential statistics at 0.05 level of significance. The mean score of perceived maternal role competence obtained by respondents was  $72.48 \pm 8.33$ . The mean score of satisfaction and efficacy domain were  $32.61 \pm 5.76$  and  $34.34 \pm 4.45$  respectively. There was significant association of perceived maternal competence and age of the mother ( $p < 0.022$ ), educational status ( $p = 0.011$ ), employment status ( $p = 0.019$ ) and readiness for pregnancy ( $p = 0.022$ ). The study findings revealed positive correlation in between perceived maternal role competence and age of respondents ( $r = 0.202$ ,  $p = .006$ ) and age at marriage ( $r = 0.159$ ,  $p = 0.030$ ). There is a need to support young mothers to adjust in a new role of the mother. Higher education, along with better job opportunities and planned pregnancy are essential for proper infant care. Education and support by the nurses and family members is of utmost importance to boost up self-esteem and increase competence in maternal role.

### Biography

Nirsuba Gurung has completed BSc in Nursing and has the experience of working in labor room of Teaching hospital of Kathmandu and as Assistant Lecturer in nursing program of medical college in Pokhara. Currently, she is pursuing her master's in nursing in women health and development. She is also involved in many health camps and community awareness programs.

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# BREAST CANCER

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## Prevalence of arm lymphedema among patients with breast cancer surgery

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**Background:** Lymphedema is a common complication of cancer therapeutics; its prevalence, treatment outcomes and costs have been poorly defined. It is potentially a debilitating condition in breast cancer survivors which negatively affects the quality of life. This study aims to assess the prevalence of arm lymphedema among patients with breast cancer surgery.

**Methods:** A cross-sectional study was conducted to assess the prevalence of arm lymphedema among women with breast cancer surgery. Purposive sampling technique was used to collect the data from a sample of 66 women of selected hospitals. Data were collected through self-constructed structured and semi structured interview based questionnaire which consisted socio demographic information and clinical related factors.

**Results:** The overall prevalence of arm lymphedema was found to be seven (10.6%) respondents among the study population. In this study, 41 (62.1%) respondents were <50 years of age, 13 (19.7%) had education of secondary level, 27 (40.9%) had received radiation therapy, 63 (95.5%) had no history of infection, 54 (81.8%) had undergone modified radical mastectomy and 56 (84.8%) had involved lymph node resection. Statistically, no significant association was found between these variables.

**Conclusions:** On the basis of these findings, this conclusion has been drawn that prevalence of arm lymphedema among patients with breast cancer surgery was low (10.6%). Moreover no association was found between the prevalence of arm lymphedema, sociodemographic variables and clinical related factors.

### Biography

Radha Acharya Pandey has completed my master's degree in Adult Nursing from the Institute of Medicine, Nepal. She is an Assistant Professor of Kathmandu University School of Medical Sciences. She has published more than 15 papers in reputed journals and has served as a reviewer for a number of journals in her related field and earned certificate for quality review. She has presented paper at international and national conferences and organized conference, workshop in related areas.

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### Notes:



4<sup>th</sup> World Congress on

# BREAST CANCER

May 08-10, 2017 Singapore

## Analytical study of patients with breast cancer reporting late to Regional Cancer Centre, Allahabad and its association with sociodemographic profile in Indian women

Ravi Kiran Pothamsetty, Radha Rani Ghosh and Baby Paul Thaliath  
Regional Cancer Centre, India

**Background:** Breast cancer poses a major threat to public health, attributing to the fact that for every two women newly diagnosed with breast cancer, one woman dies of it in India.

**Objectives:** To explore factors associated with delay in seeking referral for cancer treatment among breast cancer patients and evaluate the association between late presentation of the breast cancer and sociodemographic profile.

**Methods:** This analytical study design has been conducted at RCC from January 2015 to January 2016. Total patients enrolled in the study were 376 women. Data were collected and recorded using a structured interview technique by the doctors.

**Results:** 31% (n=117) of patients reported  $\leq 3$  months and 69% (n=259) of patients have reported  $> 3$  months to RCC. Out of 259 patients, 67% and 33% were attributed to patient delay and system delay respectively. The most common reason of patient delay and system delay were usage of alternative medicines (33%) and delay in sanctioning money through government schemes (33%) respectively. Family history, educational background, economic status, occupation, religion, personal history of breast disease, stage grouping and pattern of presentation were significantly associated with late reporting to RCC ( $p < 0.05$ ).

**Conclusion:** Significant number of women with breast cancer in Allahabad experience reported late to RCC due to poor awareness and misconceptions of the disease. Interactive and comprehensive public health strategy should be implemented for annihilation of barriers.

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4<sup>th</sup> World Congress on

# BREAST CANCER

May 08-10, 2017 Singapore

## Vitamin D and biphosphonate in neoadjuvant advanced breast cancer

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**Purpose:** Vitamin D and calcium deficiency is associated with increased breast cancer risk and decreased breast cancer survival. The purpose of this study is to determine whether the addition of vitamin D and Zoledronic Acid (ZA) to Neoadjuvant Chemotherapy (NACT) gives complete histological responses. We report a prospective evaluation comparing complete pathological response between different biomolecular sub-groups.

**Patients & Methods:** The study included 431 women with stages III locally advanced breast cancer who received neoadjuvant chemotherapy and Zoledronic acid. All patients were prescribed vitamin D3 (cholecalciferol) 400 IU and calcium carbonate 1,000 mg daily. The main objective is the complete histologic response. Secondary endpoints were the overall survival of patients targeted by the study.

**Results:** Histologic complete response with Zoledronic acid and vit D was 40.13% .the higher in the subgroup Her2/luminal (RH±Her2+) and under Her2+ (HR-Her2+) and the lowest rate was observed in the triple negative group as classified by Sataloff, overall survival was 45.77 months for subgroups (Her2/luminal and in Her2+ group) vs. 44.11 months for triple negative group.

**Conclusion:** Our study confirms the potential protective effects in vitamin D in neoadjuvant breast cancer.

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**Notes:**

4<sup>th</sup> World Congress on

# BREAST CANCER

May 08-10, 2017 Singapore

## Fatty acid synthase regulates the chemosensitivity of breast cancer cells to Cisplatin – induced apoptosis

**Shadia Al Bahlani**

Sultan Qaboos University, Oman

Fatty Acid Synthase (FASN) is a key enzyme in fat biosynthesis that is over-expressed in advanced breast cancer stages. Cisplatin (CDDP) is a platinum – based drug used in the treatment of certain types of this disease. Although it was shown that FASN inhibition induced apoptosis by enhancing the cytotoxicity of certain drugs in breast cancer, its role in regulating the chemosensitivity of different types of breast cancer cells to CDDP-induced apoptosis is not established yet. Therefore, two different breast cancer cell lines; Triple Negative Breast Cancer (TNBC; MDA-MB-231) and Triple Positive Breast Cancer (TPBC; BT-474) cells were used to examine such role. We show that TNBC cells had naturally less fat content than TPBC cells. Subsequently, the fat content increased in both cells when treated with palmitate rather than oleate, whereas both fatty acids produced apoptotic ultra-structural effects and attenuated FASN expression. However, oleate increased FASN expression in TPBC cells. CDDP decreased FASN expression and increased apoptosis in TNBC cells. These effects were further enhanced by combining CDDP with fatty acids. We also illustrate that the inhibition of FASN by either siRNA or exogenous inhibitor decreased CDDP - induced apoptosis in TPBC cells suggesting its role as an apoptotic factor, while an opposite finding was observed in TNBC cells when siRNA and fatty acids were used, suggesting its role as a survival factor. To our knowledge, we are the first to demonstrate a dual role of FASN in CDDP-induced apoptosis in breast cancer cells and how it can modulate their chemosensitivity.

### Biography

Shadia Al-Bahlani is an Assistant Professor and Head of Department for Department of Allied Health Sciences, College of Medicine and Health Sciences, Sultan Qaboos University, Oman. She obtained her PhD in Cellular and Molecular Medicine from University of Ottawa, Ottawa, Canada. Her research interest is in Cellular and Molecular Pathology mainly in Cancer. She is highly skilled in Cell Culture and Molecular Biology techniques. She is running the Biomedical Science program in the college with the help of a dedicated team. She has a good experience in academia in terms of curriculum management, course evaluation and advising students.

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4<sup>th</sup> World Congress on

# BREAST CANCER

May 08-10, 2017 Singapore

## Consumption of deep fried foods intake and breast cancer risk among women in Karachi, Pakistan - A matched case control study

Uzma Shamsi, Shaista Khan, Iqbal Azam and Romaina Iqbal  
Aga Khan University, Pakistan

**Introduction:** Diet could be a major modifiable risk factor for breast cancer prevention. The objective of this study was to assess the association between different food items and breast cancer among women attending two tertiary care hospitals in Karachi, Pakistan.

**Methods:** 294 cases of histologically confirmed breast cancer and 580 controls matched according to age (+5yrs) and hospitals were interviewed. A detailed quantitative food-frequency questionnaire was used to assess the usual intake of 36 food items. Conditional logistic regression analysis was conducted to assess the association between tertiles of intake of each food item and breast cancer. Mean intakes of the different food items per day were calculated in cases and controls. Crude and adjusted matched odds ratios (ORs) with 95% confidence intervals using conditional logistic regression are reported. SPSS for windows (version 19) was used to analyze data.

**Results:** A positive and graded association was observed between the intake of each of the following food items and breast cancer: Halwa puri, (OR 1.71, CI: 1.16-2.52), fried potatoes (OR 1.85, CI: 1.21, 2.81), consumption of fish (adjusted odds ratio (OR) 1.66, 95% confidence interval (CI): 1.11, 2.49). Conversely we observed an inverse association between breast cancer and the intake of green tea (OR 0.17, CI: 0.03-0.88) and milk dessert (OR 0.54; CI: 0.35, 0.82), with higher levels being protective.

**Conclusion:** Frequent consumption of deep fried food items like halwa puri, fried potatoes (French fries) were associated with an increased risk of breast cancer. Our study indicates the unexpected association of breast cancer risk with use of fish which may also be explained by its usual consumption in fried form in our setting. However, due to current water pollution, fish contamination with potential carcinogens needs further research.

### Biography

Uzma Shamsi completed her MD from Khyber Medical University Peshawar Pakistan and Masters in Epidemiology and Biostatistics from Aga Khan University Karachi Pakistan. She is a forward-thinking educator, researcher and doctor with an extensive background in research, teaching and clinical patient care. During her professional career at Aga Khan University that spans many years, she has received various awards, honors and scholarships. Currently, she is a PhD candidate in Medicine at the University of Adelaide Australia. Her main research area of interest is breast cancer and lifestyle risk factors.

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