

Mayo Clinic Q & A “ Breast Cancer Survivorship “ Dr. Daniela...

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SPEAKERS

Dr. Halena Gazelka, Dr. Daniela Stan, Narrator

N Narrator 00:00
Coming up on Mayo Clinic Q&A, a look at breast cancer survivorship.

D Dr. Daniela Stan 00:05
I feel that the diagnosis is always very hard. The hardest period of time is actually from the diagnosis until we start to make a plan. People are very worried. They don't know what the future brings. the treatments. After we discuss the treatments, people psychologically start to feel better, but then the physical issues start to occur after the treatments.

N Narrator 00:27
If breast cancer is found early, there are more treatment options and a better chance for survival. Getting checked regularly and living a healthy lifestyle can put your mind at ease and may also save your life.

D Dr. Daniela Stan 00:38
Breast cancer is actually a very good prognosis cancer generally speaking. We know that a very balanced lifestyle is important from the breast cancer survivorship and exercise, diet, keeping your weight normal, stress management, try to have a very balanced life, I feel that making yourself a priority that way is important.

D Dr. Halena Gazelka 01:01

Welcome, everyone to Mayo Clinic Q&A. I'm your host Dr. Halena Gazelka. After skin cancer, breast cancer is the most common cancer diagnosed in women in the United States, but it can occur in people of all gender identities. Fortunately, thanks to earlier detection and advances in diagnosis and treatment, most people diagnosed with breast cancer will survive their diagnosis. People who survive breast cancer do have unique needs depending on their cancer type and stage. But there are some experiences that affect many breast cancer survivals and are shared. Joining us to discuss is Dr. Daniela Stan, an internist at the Mayo Clinic breast diagnostic clinic. Thank you for being here today, Daniela.

D Dr. Daniela Stan 01:46

Thank you so much for having me. Very excited to be here.

D Dr. Halena Gazelka 01:49

Well, because this is such a common topic and such a common issue for so many women, I thought it was vital that we talk about this. What are people most worried about after they complete their treatment for breast cancer?

D Dr. Daniela Stan 02:05

Most people, the most common symptom or worry I hear is actually the fear of recurrence. It's very important to address that in the beginning, try to settle that issue, try to inform people of their risk of recurrence and what they can do about it. Secondly, probably all these physical or other psychological issues, physical issues from the surgery, from the medications, from the chemotherapy. Then psychological issues anxiety, depression can happen after cancer diagnosis and treatment.

D Dr. Halena Gazelka 02:41

What kind of coping strategies do you try to encourage your patients to use to deal with these worries?

D Dr. Daniela Stan 02:48

Most of the time people have some resources either in their family or in their primary care doctor. We do have a system in which we refer our patients to oncology psychiatry. We have a great group of psychologists, so I feel connecting to a psychologist through your primary care physician or in the community would be very important. Friendships, knowing your friends, knowing who cares, try to spend a lot of time with them seems to be very, very supportive for women. Family, of course, involving people in your diagnosis as much as people are comfortable. Not everybody is comfortable sharing the diagnosis. But for those who do, I think family and friends are very important. And of course, if there is established depression and anxiety beyond what's expected from a cancer diagnosis, something that lasts for a long time, referral to a psychiatrist would be important to consider medications.

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Dr. Halena Gazelka 03:53

Daniela, I've been very open about my own diagnosis and treatment with breast cancer last year. At the time that I was going through it, thinking about what I would experience afterward was not even on my radar. Literally all I was thinking was get rid of this breast cancer, and then I will be fine. So, what should patients be ready and prepared to ask their doctors about what they might face after breast cancer?

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Dr. Daniela Stan 04:18

I feel that the diagnosis is always very hard for people. And I think the hardest period of time is actually from the diagnosis until we start to make a plan psychologically wise. People are very worried. They don't know what the future brings, the treatments. After we discuss the treatments, people psychologically start to feel better. But then the physical issues start to occur after the treatments. So, I feel that people should know the roadmap, what treatments are they expected to have, and the timeline of these. How long will they be incapacitated physically or psychologically? Sometimes what can impact their work schedule. What can they do if they have to receive chemotherapy? What type of activities they can attend? What's safe, what's not safe? What can they eat? Sometimes there is a lot of nausea associated with the chemotherapy. So, we have resources in which we educate our patients, classes on chemotherapy, diet, nutrition, what can you eat? What can you not? Fatigue is a big issue pretty much through the whole treatment. Fatigue is pervasive. A lot of people go through that. So, just preparing that for how to deal with fatigue, we have these classes. We have physical therapies that are dedicated to help people with that. So, just knowing how to deal with that on a daily basis, how to pace yourself, how to get help from your family and friends, how to go forward. And after the treatment is completed, many, many resources are available to deal with, again, the physical and psychological issues.

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Dr. Halena Gazelka 06:02

Daniela, you mentioned some of the short-term effects of therapies for breast cancer such as nausea and fatigue, etc. Tell us a little bit about long-term effects that individuals might experience after going through treatment.

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Dr. Daniela Stan 06:17

It depends on the type of treatment of course, but the mainstay treatments for breast cancer are surgery radiation, sometimes chemotherapy, almost always anti-estrogen treatment if the cancer had an estrogen receptor. So long-term treatments related to surgery from a lumpectomy are pretty low, although we do see long-term discomfort in the breast and the chest wall that was radiated. From chemotherapy we do expect to see neuropathy, sometimes brain fog is a very common symptom that tends to go away after a year. Neuropathy tends to stay a bit longer. It's treatable, not always curable. Some people unfortunately do develop heart problems from the chemotherapy, very rare but it happens. So, it's something we need to follow. The heart function, the common treatment is anti-estrogen treatments, and from that,

we see people who take it without any problem whatsoever, but others have multiple symptoms of menopause like problems with hot flashes, maybe some vaginal dryness, maybe some achiness in their joints. From Tamoxifen we have to be careful about a small but real risk of uterine cancer, strokes, blood clots. From the other group, the aromatase inhibitors, we have to monitor the bone density, make sure we keep a good eye on it. Treat it if it's needed, if the bone density goes down, or this problem. And then of course, the potential psychological issues, anxiety, depression, those are very important to treat because it seems that the risk of recurrence is to some degree correlated with the degree of stress of their breast cancer diagnosis, trying to bring that stress down seems to be important for survival.

D Dr. Halena Gazelka 08:13

That's very interesting. So, what are a couple of key things that you tell patients to do to prepare for breast cancer survivorship?

D Dr. Daniela Stan 08:23

The most important thing, and this is something I'm very passionate about, was shown over and over to be beneficial in the amount and the quality of survivorship is regular exercise. That's what I tell my people try to do something if possible, every day. The guidelines say every cancer survivor of any type of cancer should exercise at least 150 minutes a week moderate exercise, or 75 minutes a week of intense exercise, plus two days of strengthening exercises. So, that's the main issue I discuss with them after the treatments are completed. Even before I give them a roadmap, and I tell them this is probably not the best time to think about starting a regular exercise program, but on the long run I feel you really have to take an hour a day for yourself. Maybe increase to two hours a day for yourself, try to exercise regularly, try to do something mindfulness wise, maybe some yoga, maybe some walks in the nature to try to decrease that stress. So, exercise, stress management, eating a very healthy diet, which doesn't mean a diet, it just means a very common sense.

D Dr. Halena Gazelka 09:48

Making good choices.

D Dr. Daniela Stan 09:49

Exactly. We usually recommend the Mediterranean diet which avoid as much as possible processed foods, red meats, alcohol if possible. We used to say less than four alcoholic drinks a week is reasonable. As of recently, there is a study showing that actually any amount of alcohol increases a little bit the risk of recurrence. So, we tell people try to avoid it. It doesn't mean that on occasion you can go out and have a steak and a glass of wine celebrating something. It's reasonable. But try to follow your calorie intake, try to keep it under normal limits, and try to bring your weight under reasonable, healthy limits.

D Dr. Halena Gazelka 10:37

Dr. Halena Gazelka 10:17

Daniela, you mentioned that one of the biggest concerns that individuals have after a diagnosis of breast cancer is that it could recur. What do you do to help speak to that concern for patients or tell them to plan to do?

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Dr. Daniela Stan 10:50

I feel it's very important for our patients to be empowered and educated. And I give them the information I can. They of course worry. They think every single symptom can be related to breast cancer. So, I think educating them for them to know exactly what we are looking at when we worry about the symptoms of recurrence. So, we talk about if you have a persistent symptom, the most common type of breast cancer is estrogen positive, and those most commonly travel to the bones. So, I focus on that. If you have a persistent bone pain that's in the same place for two or three weeks, doesn't go away, doesn't come and go, it's there almost all the time, I want to know about it. More rarely the cancer, especially the estrogen negative, can travel to the liver, to the lungs, to the brain. So, I tell them if you have a persistent pain in the liver area in the upper abdomen area on the right side, or in the lung area, or a persistent cough, chest pain, I would like to know about it. A persistent headache. again, two/three weeks is what we are looking at that's just not the typical headache, doesn't go away easily. That's something we would want to know about.

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Dr. Halena Gazelka 12:12

So, even for a woman who has no evidence of cancer after treatment, what sort of plan do you put them on as far as imaging or check-ins with physicians, etc. to help relieve that stress of recurrence?

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Dr. Daniela Stan 12:28

Very important for them to know this information as well because a lot of people are expecting bloodwork, or expecting PET scans, or CAT scans to look for signs of recurrence. So, we talk a lot about what the guidelines are and what we recommend. And really, the guidelines only recommend a breast examination every six months for the first two years or three years at least, and then every year. Usually at Mayo we do it every six months for five years. And then a mammogram, if your breasts were conserved, you need a mammogram once a year, not more often than that. Occasionally if people had a mastectomy with breast reconstruction, you have implants in there, the implants have to be screened for rupture, not for recurrence, but every three to four years we do a breast MRI to just check those implants. And I do tell my patients why am I not doing blood tests, and why am I not doing CAT scans is because there were studies showing that there is no survivor advantage in people who have these very intensive workups every six months or every year, and those people they had a lot of biopsies and a lot of anxiety actually caused by this test, and it did not prolong survival. So, that's why again educating my patients about what to expect, what to look for, and only in those situations if they have those persistent symptoms, then we would do a PET scan or a bone scan, something specific to the area of discomfort that was shown to be beneficial for people in this situation.

Dr. Halena Gazelka 12:30

D Dr. Halena Gazeika 14:18

And we know that you don't go through a cancer diagnosis alone typically, or we hope not. And so, what can, Daniela, family, friends and caregivers do to help the breast cancer survivor?

D Dr. Daniela Stan 14:32

A lot of the times in the beginning when I see my patients coming to the breast clinic for their first ever visit there is a lot of anxiety. They typically bring a friend or a spouse, whoever they feel most comfortable with. And those people are there to listen, to help make decisions, to take notes sometimes, very helpful in the beginning phase. Some people bring their friends for the chemotherapy or other radiation treatments. So, supporting the patient or the person who has breast cancer through those treatments, be with them for those treatments, I think would be very beneficial. Helping them share the news with a family they choose or with extended family or with the other friends, helping them do that, set up a website, things like that for people who feel comfortable, who want to have that. Some people are very private, so maybe the family and the friends should understand that not everybody wants to share not everybody wants to become a champion of this cause. And beyond that, after the treatments are over, maybe just listening, I know that a lot of my patients are saying, nobody wants to hear me anymore. It's like everything it's over, the treatments are over, and we need to move on. And that's a time where it's a vulnerable time, people do not feel comfortable, because that's what the intensive treatments have done, and they feel sometimes abandoned. So, I feel that's a time when the family and friends can maybe step in, just listen to them, just understand their fears, encourage them to talk to their medical providers if it's needed. And beyond that, everybody knows about, you know, maybe a gift card for meals, things like that. It's always helpful during the treatment phase. But after that, just make sure you keep being social if you had breast cancer, keep interacting with your friends, with your family, communicate, and with your care team, I think it's very important to stay in touch. If you have any of these prolonged symptoms, either psychologically or physically, we need to know because we can help.

D Dr. Halena Gazeika 16:48

Daniela, it has occurred to me the more years that I have spent practicing medicine, that I before going to medical school, I believed I was going to learn all these things about the human body and how to fix things, and how to prevent disease. And now I am incredibly acutely aware of the physical is only part of an illness when we suffer from it. And there's so much more that goes into it. Do you have any last words of wisdom for our listeners as they consider breast cancer survivorship themselves or for someone that they love?

D Dr. Daniela Stan 17:25

I feel, again, it's a very personal experience for everybody. I think that maybe this is an opportunity to realize it is my time to get better to maybe improve whatever I can in my lifestyle. Maybe it is time to slow down if I was too stressed out and to involve with projects and overwhelmed again, because stress is important. Maybe it is time to take a time in the day for myself and pay attention to my needs, do something different that I always wanted. And again, not with the idea that the life is ending breast cancer is actually a very good prognosis cancer generally speaking, but with the idea that we know that a very balanced lifestyle is important

from the breast cancer survivorship and again, exercise I know I keep saying that, but it is very important. Exercise, diet, keeping your weight normal, stress management and actually sleep. Sleep is very important in all our diseases pretty much and in breast cancer as well, especially because some medications can impact sleep. So, make sure you sleep at least seven hours a day. So, try to have a very balanced life. I feel that making yourself a priority that way is important and maybe have your family restructure their priorities as well to understand that you need maybe more time for yourself.

D Dr. Halena Gazelka 19:05

Great words of wisdom, Daniela, thank you for being here today.

D Dr. Daniela Stan 19:09

Thank you so much all the best to everyone.

D Dr. Halena Gazelka 19:12

Our thanks to Dr. Daniela Stan, internist in the Mayo Clinic breast diagnostic clinic for being here today to talk to us about breast cancer survivorship. I hope that you learned something. I know that I did. We wish each of you a wonderful day.

N Narrator 19:27

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