

What You Should Know About Breast Cancer Which Has Advanced Locally

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INTRODUCTION

Locally advanced breast cancer is a cancer that has grown to an advanced stage but has not spread to other regions of the body. Chemotherapy, for example, can help to alleviate symptoms and halt the progression of the disease. Locally advanced breast cancer (LABC) patients may get a variety of treatments, including chemotherapy or surgery. People with LABC will have a different attitude depending on the sort of treatment they receive and the degree of their sickness [1].

What does it mean to have Locally Advanced Breast Cancer?

An advanced stage of breast cancer that has only spread to local tissues is known to as LABC.

- Any size tumour that has grown into the chest wall, skin, or both, with or without lymph node growth
- Tumours measuring more than 5 centimetres (cm) in diameter with lymph node proliferation
- Expansion of local lymph nodes, such as those in the armpit and below the collarbone, in conjunction with the presence of tumours at any stage

Doctors may refer to breast cancer as locally advanced when the tumour is large and also affects:

- The lymph nodes, causing noticeable growth
- Underlying chest tissue
- The physical appearance of the breast
- The skin on the breast

Signs & Symptoms: Locally advanced breast cancer (LABC) – The majority of LABCs can be felt by the woman and her doctor, and the cancer may be visible as well [2].

Inflammatory breast cancer — inflammatory breast cancer (IBC) is a form of LABC with its own set of symptoms. IBC does not always generate a lump in the breast that may be felt. Instead, it produces thickening and swelling of the breast skin, which might be reddish and heated to the touch, or have an orange peel texture. The breast is frequently uncomfortable, swollen, and irritated.

Treatment: Chemotherapy, surgery, and radiation therapy are frequently used to treat LABC. (See the section on 'Locally progressed breast cancer' in "Overview of the management of newly diagnosed, invasive, non-metastatic breast cancer. Chemotherapy is a term for medicines that are used to stop or slow the growth of cancer cells in any part of the body. Chemotherapy usually consists of a mixture of two or more medicines administered intravenously (IV) [3].

Chemotherapy is administered in cycles rather than on a daily basis. The time it takes to administer chemotherapy and then allow the body to recuperate is referred to as a chemotherapy cycle. Chemotherapy cycles are usually two to four weeks long [4].

Preoperative chemotherapy is advised for the majority of women with LABC before surgery. Chemotherapy given before surgery (also known as neoadjuvant) can help decrease the breast tumour. Chemotherapy removes all evidence of cancer from the breast and lymph nodes in roughly 30% of instances. This is referred as as a full clinical response.

DIAGNOSIS: Breast cancer can only be diagnosed definitively through a biopsy. There are a number of different tests that can aid in the diagnosis. Doctors will go over the patient's medical history, family history, and any symptoms they are experiencing. They might also suggest one or more of the following options:

- Mammogram
- Ultrasound
- Mammogram of the breast

Breast cancer that has spread locally vs. breast cancer that has spread throughout the body

The malignant cells in metastatic breast cancer have spread to various tissues or organs throughout the body. The bones, lungs, liver, and brain are among of the most common places. However, LABC refers to a situation in which the tumour has not migrated beyond the local breast tissue, including chest wall soft tissue and lymph nodes.

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Breast cancer that has spread to other parts of the body can cause a variety of symptoms, including bone discomfort, shortness of breath, and severe headaches. However, LABC symptoms are limited to the breast area.

When to Contact a Doctor

The American Cancer Society recommends that women between the ages of 45 and 54 undergo a mammogram every year. However, some people who are at a higher risk for breast cancer, such as those who have a family history of the disease, may require earlier screenings. Women between the ages of 40 and 44 should be able to begin screening with a mammogram every year if they choose, according to the ACS [5].

Anyone who develops a lump or has symptoms that resemble those of breast cancer should see a doctor as soon as possible. People who are undergoing therapy should also discuss their experiences and adverse effects with their doctor. Additional medications can be suggested by a doctor to aid with side effects

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