

Breast Cancer and Prophylactic Mastectomy

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ABSTRACT

In this paper authors criticize on various grounds, the proposal of Drife for mastectomy as a prophylactic measure for breast cancer. The incidence of this was reported as the highest in western countries than in Asia and Africa. During the 1998 international gathering on Psycho Social impact of Breast Cancer, the president of the congress, pointed out stress experienced by patients on different aspects of life and their concern about body image and sexuality.

Keywords: Cancer; Mastectomy; Social impact

INTRODUCTION

Cancer of breast is a serious concern to medical science. The incidence of this was reported as the highest in western countries than Asia and Africa [1]. In India rate of breast cancer reported is 25.8/1,00,000 women of which 12.7/1,00,000 women died [2]. Khanolkar [3] observed high incidence of breast cancer among Parsees when compared to Hindus who married almost ten years before Parsees and merrily breast fed their children. In U. K. one in seventeen [4] and in France one in fourteen women [5] suffered from breast cancer. In United States of America, total number was 2, 52, 710 reported and of which 41,070 deaths were taken place [6].

Prophylactic Mastectomy

The research workers and clinicians attempt to achieve formulae or techniques to prevent or to stop breast cancer. Fisher and Carborne [7] advocated for the best possible cosmeses of the organ without compromising the patient's chance for cure. Drife [4,8] proposed mastectomy as a prophylactic measure for cancer of breast. In his hypothesis he argued that mammae are a group of milk glands surrounded by fat and they are as equivalent to swollen perineum of chimpanzee. He suggested that the organ may be removed any time, after lactation or menopause. Drife's hypothesis deserves a close look.

DISCUSSION

In animal kingdom woman is the sole example whose breast develop before and during puberty [9] and remain enlarged throughout

reproductive life. By rule, in all either mammal which are restricted for a short period of pregnancy and lactation. Biologists consider the extra role played by the organ in woman is in sexual strategy. With minimum exception, women of all cultures are conscious about the size of their breast. They often ask clinicians for medicine or cream for enlargement of their breasts [10]. Extra enlargement also causes equal embarrassment to a woman as well as doctor [11]. The tremendous efforts made in plastic surgery are a classic example of the importance as breasts occupy in the appearance of the woman [12]. Physiologically, the developed breast acts as an attractant [13]. During the 1998 international gathering on Psycho Social impact of Breast Cancer, the president of the congress, Mrs. Lilly Christensen, pointed out stress experienced by patients on different aspects of life and their concern about body image and sexuality [14]. On sex, the mouth breast contact constitutes one of technique in human petting behavior, which is most distinctly human [15]. Likewise, during coitus distinctive changes in breasts are experienced, like the erection of the nipples, increase in breast size due to engorgement with venous blood, enlargement of areola and quick spreading of maculopapular erythematous rash or "sex flush" [16, 17]. On the other side, authors observed that mastectomy lead to adverse effect on her sexual image and relationship [18]. Thirty-three percentage of mastectomized patients experienced important sexual problems like not participating in intercourse or enjoying it [18]. They observed that these women not preferred breast stimulation or coital position where breast played an important role. Prophylactic mastectomy is advised to risky females [19]. Risk factors for recurrence of breast cancer are several which include mainly genetic mutation, its presence in family members, life style, exposure to radiation and parity [20]. BRCA1

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and BRCA2 genes are mainly responsible for cancer growth after prophylactic mastectomy [21]. Today it is understood that prior to mastectomy a proper selection of patient has to be done [20]. It was fully successful without eruption of breast cancer, if it was done at or before the age of 25. Physiological observations support the view that the organ, female breast, is not only for lactation but also to function as a sex object which Drife (4) did not believe. It is known presence of enlarged breast is feminine!

CONCLUSION

For the reasons above, the hypotheses put forward by Drife [4,8] is not fully feasible and acceptable as a preventive measure for breast cancer. Sheth and Panse [22] suggested vasectomy as a prophylactic measure for prostate tumor without touching prostate gland. Any similar proposal without the removal of breast will be applaudable and acceptable to all. Members of either sex do not like to view a woman with chest of a man.

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