



Female Breast Cancer in Nevada 2000 - 2009

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Breast cancer is the most common cancer in women in Nevada and the second most common cancer in all Nevada residents, regardless of gender. Breast cancer is also the second leading cause of cancer deaths among women in Nevada. In 2009, there were 1,613 newly diagnosed female breast cancer cases and 331 women died from the disease in Nevada.

Breast cancer begins in breast tissue, which is made up of glands, called lobules, and the ducts that connect lobules to the nipple. The remainder of the breast is made up of fatty, connective, and lymphatic tissue.¹

Cancer can cause lumps in the breast, however, most breast lumps are usually caused by other medical conditions. The two most common causes of breast lumps are fibrocystic changes and cysts. Breast fibrocystic changes are benign conditions that can lead to lumps, tenderness, and soreness. Cysts are small fluid-filled sacs that can develop in the breast.²

Common forms of breast cancer are:

Ductal carcinoma is the most common kind of breast cancer. It begins in the cells that line the milk ducts in the breast.²

Ductal carcinoma *in situ* (DCIS) is when the abnormal cancer cells *have not* yet spread to other tissues in the breast.²

Invasive ductal carcinoma is when the abnormal cancer cells break through the ducts and spread into other parts of the breast tissue.

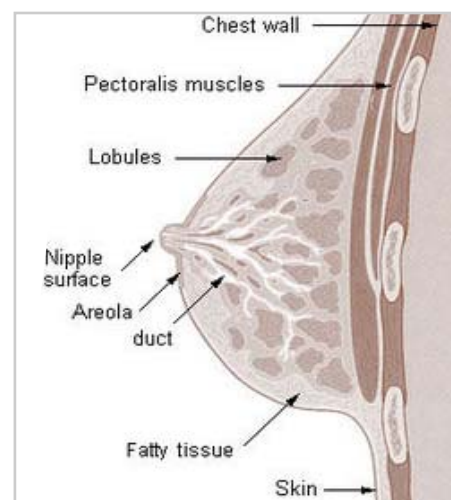
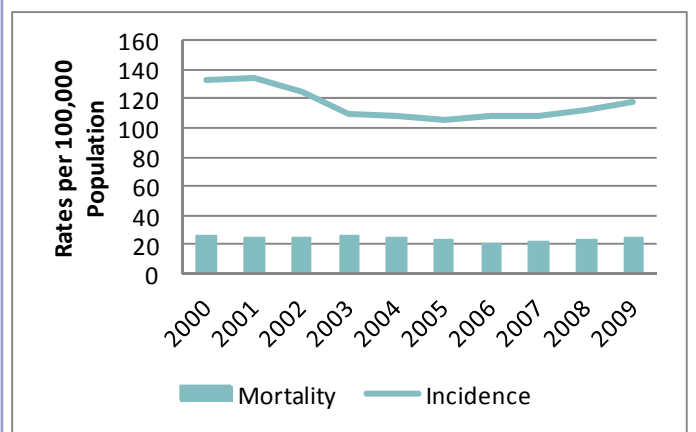
Lobular carcinoma is when the cancer cells begin in the lobes, or lobules, of the breast (glands that make milk).²

Lobular carcinoma *in situ* (LCIS) is when the cancer cells are found only in the breast lobules. Lobular carcinoma in situ, or LCIS, *does not spread* to other tissues.²

Invasive lobular carcinoma is when cancer cells spread from the lobules to the breast tissues that are close by.

Invasive cancer cells *can also spread* beyond the breast, to other parts of the body.²

Female Breast Cancer Age-Adjusted Incidence and Mortality Rates, Nevada Residents, 2000-2009



Following the criteria of the Centers for Disease Control and Prevention (CDC), breast cancer is specified with an ICD-O code of C50.

Common risk factors for breast cancer include: Getting older, early menarche (being younger at your first menstrual period), late menopause, being older at the birth of your first child, never giving birth and never breast feeding, personal history of breast cancer or other non-cancerous breast diseases, history of breast biopsy such as Atypia, family history of breast cancer, radiation therapy to the breast/chest, being overweight, inactivity, long-term use of hormone replacement therapy, and having more than one alcoholic drink per day.²

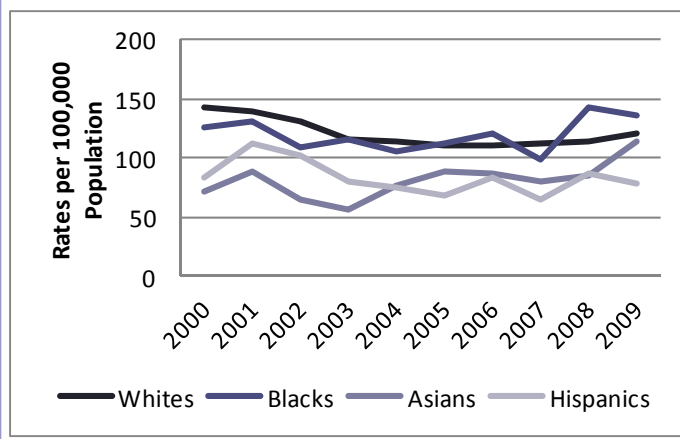
Regular screening is a reliable way to detect breast cancer at an early stage. The U.S. Preventative Services Task Force recommends annual mammograms for women beginning at age fifty; however, women at high risk should follow their doctors advice for breast screening. Breast cancer is easiest to treat and has the highest survival rate when it is detected early. A mammogram plus a clinical breast exam, an exam done by your doctor, is the most effective way to detect breast cancer in its earliest stages.

The Women's Health Connection Program of Nevada assesses Nevada's needs related to breast and cervical cancers. Women's Health Connection is funded by the National Breast and Cervical Cancer Early Detection Program of the Centers of Disease Control and Prevention (CDC) for the purpose of providing breast and cervical cancer screening at no costs for age-eligible women who are uninsured or underinsured and who meet the program's income guidelines. This program provides screening, tracking, follow-up services and treatment referral; provides public education regarding breast and cervical cancer

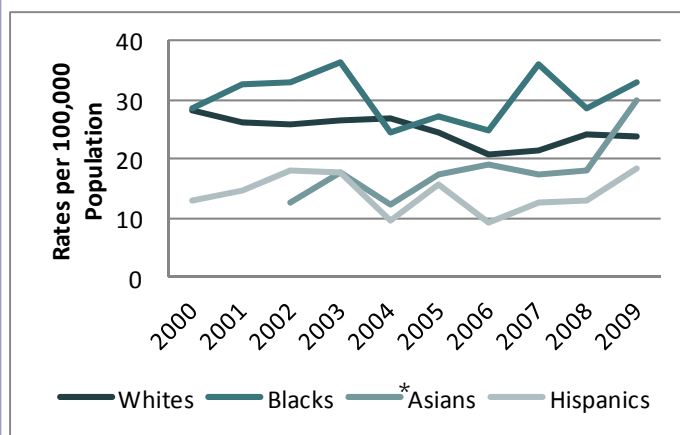
For additional information regarding breast cancer screenings contact:
Women's Health Connection
 4150 Technology Way, Suite 100,
 Carson City, NV 89706
 (775) 684-4123 or
 Access to Healthcare work
 877-385-2345
www.health.nv.gov/cd_whc_breastcervical_cancer.htm

to high-risk groups; and provides professional education regarding diagnostic and therapeutic standards for breast and cervical cancer.

Female Breast Cancer Age-Adjusted Incidence Rates by Race/Ethnicity, Nevada Residents, 2000-2009



Female Breast Cancer Age-Adjusted Mortality Rates by Race/Ethnicity, Nevada Residents, 2000-2009



* Due to small counts, data for Asian Nevada residents are not reported for 2000 and 2001 because they don't meet standards for statistical reliability or confidentiality.

Reports on related topics can be obtained from the Nevada State Health Division website at:
www.health.nv.gov/FP_Publications.htm

Technical Notes:

- Data are from the Nevada Central Cancer Registry.
- The International Classification of Diseases for Oncology (ICD-O) Codes are used to code site (topography) and histology of neoplasms, usually obtained from a pathology report.
- Following the criteria of the North American Association of Central Cancer Registries (NAACCR), only invasive cases are included in this report.
- Due to small counts, other race/ethnic groups are not reported because they don't meet standards for statistical reliability or confidentiality.

1. American Cancer Society Inc. *Breast Cancer Facts and Figures 2009-2010*[Internet]. 2009. [accessed 2011 April 4]. Available from: www.cancer.org/acs/groups/content/@nho/documents/document/f861009final90809pdf.pdf.
2. Centers for Disease Control and Prevention (CDC). Breast Cancer. *Basic Information About Breast Cancer* [Internet]. [accessed 2012 Jan 25]. Available from: www.cdc.gov/cancer/breast/basic_info/.