**Part II:**

**Research paper draft**

**Breast Cancer: What are the effects, factors, and contributions of cancer?**

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1. **Introduction**
	1. **Research question and objectives**

How does breast cancer effect all who are involved?

The purpose of this paper is to examine how breast cancer has impacted, and continues to impact, individuals, in large amounts, every year. Breast cancer is predominately diagnosed in female patients. Breast Cancer is one of the most recognized cancers throughout the world, especially in the United States. Women with a minimum age of 50 are recommended, by their physicians, to have mammograms taken yearly. Mammograms allow physicians to detect any abnormal growth or signs of cancer. “Among U.S. women, breast cancer is the most commonly diagnosed cancer (excluding skin cancers) and the second leading cause of death, following lung cancer (Jemal & Ma, 2012).” The temporary effects of breast cancer, raise concern for the patients with families. These concerns stem from temporary effects becoming permanent effects; causing children and predominately husbands, to lose a significant part of their household. “However, over the past 20 years, breast cancer incidence and mortality rates have been increasing rapidly in economically less developed regions (Jemal & MA, 2012).” The urgency to conduct research and provide conclusions to treatments, and eventually cures, is rapidly increasing.

 **Background of your research idea**

Provide a description on the history of the main concepts in your research topic with at least 4 sentences with citations. Include in-text citations and references.

 Breast cancer has been traced back to Ancient Egyptian times. Being diagnosed with breast cancer was a guaranteed death sentence for women, about 60 to 70 years ago. The first documented symptoms of breast cancer come from Edwin Smith Papyrus; encrypted text, found in an Egyptian tomb, describing different symptoms of the cancer. Early assumptions, for the cause of breast cancer, stemmed from thoughts of punishment or one’s fear in the disease. Beginning in 1882, William Stewart Halsted, started performing mastectomies. This procedure, being done in the 1800’s, lacked proper anesthetics and hygienic care. Both breast tissue and muscle were removed, leaving the patient in pain, and open to infection during the healing process. “It was not until the 19th century, when improvements in sanitation and diseases control dramatically increased the average life span of women, that breast cancer demanded serious attention from the medical community (Suchy, 2012).” Crediting the 20th and 21st century, chemotherapy and radiation has improved tremendously, providing crucial, yet effective, treatments for patients. “This is the second most frequent cancer in the world, and is by far the most common malignant disease in women (Parkin, 2001).” My mother had breast cancer and I saw how it affected her physically, mentally, and emotionally. The cancer was a revelation to me, knowing what breast cancer is and how it can be passed through inheritance is important, it raised my awareness, not only as a man but as a son of a survivor. “Women with a parent, sibling, or child with breast cancer are at higher risk for breast cancer (Siu, 2016).” With cancer being able to impact women so aggressively, the advanced understanding of the malignant disease is in need. That is why it is important to understand breast cancer from its causes, to its treatments.

1. **Cause of Breast Cancer**

The risk of breast cancer increases with different factors contributing to it like age. As many people believe when a person gets older they get stronger but with cancer it appeals that the older someone get the higher of a chance to get breast cancer. “Age, which supports the concept that cancer is a disease largely associated with aging; so, the longer the one lives. The greater that person’s risk for developing the disease.” during a woman’s premenopausal ages and then lessons as the woman approaches her 80’s. “During 2004-2008, the incidence rate among U.S. women ranged from 1.4 per 100,000 women for ages 20-24 to 421.4 per 100,000 women for ages 75-79... (Jemal & Ma, 2012)”. Mortality rates increase as age increases mainly due to the poor survival rates for older women and the harsh reality of cancer. “During 2004-2008, breast cancer mortality rate increased from 2.9 per 100,000 women for ages 30-34 to 177.6 per 100,000 women for ages ≥ 85... (Jemal & Ma, 2012)”.

In further detail, a person’s race and/or ethnicity plays a role in their chances of developing breast cancer, or any cancer. “According to the American Cancer Society, the incidence of cancer (those who are diagnosed with the disease) in the United States is highest in African-Americans followed by Caucasians, Hispanics, Asian-Americans and American Natives, and deaths (those who die from the disease) are highest in African-Americans followed by Caucasians, American Natives, Hispanics, and Asian-Americans (Anderson, 2010).” The higher rates of death are a result of, “socioeconomic factors including education and income level, access to health insurance, and routine medical screening and services (Anderson, 2010).” This enables fewer patients having access to quality equipment to detect cancer and/or treatments for cancer. There are a lot of different delays that occur while not having money or health insurance, when it comes to following up with a mammographic reading. There is not a huge sense of urgency when considering breast cancer, unless the patient has a history of cancer within the family. A lack of urgency when considering breast cancer has left patience in, what may feel like, an inescapable stage, making choices for treatment limited.

1. **Breast Cancer effects on different ethnicities**
2. **Two paragraphs using supporting details from outline.**

 As previously discussed, ethnicity can impact an individual’s experience with cancer, both positively and negatively. The availability of health care resources, reliable doctors, and finances to guarantee proper care are not guaranteed to all communities. A Caucasian women patient might have the best insurance have the money needs for the cost of breast cancer. This allows for the women to get treatment right away and be helped by the best doctors and equipment. Often African American women patients have neither money nor insurance. The negative effect of not having insurance may not cut some of the cost nor get the best treatment. So, when treatment begins it tends to be prolonged. By prolonging the cancer, it can often spread to different areas or even kill the patient.

One of the largest factors, proving different effects in ethnicities, is lifestyle behaviors. Behaviors such as smoking, drinking, chewing tobacco and inhalation of toxic fumes could all effect the rates of cancer. Also with lifestyle behaviors, people that are in a lower social class, do those extra activities and tend to get addicted. The routinely use of the activities being increases the spread of cancerous cells. Education and income levels also effect different ethnicities; being informed and knowing to look for as signs of cancer could easily save a life. As each ethnicity ages different on the outside, the inside corresponds. Difference on how and when aging occurs in the body can delay or progress the formation of cancer.

1. **Types of Breast Cancer and Factors leading to them.**

Breast Cancer has many different forms stemming from different causes. There are three common kinds of Breast Cancer which include; invasive ductal carcinoma and invasive lobular carcinoma. Carcinomas are tumors that start in the epithelial cells that line organs and tissues throughout the body. Invasive ductal carcinoma begins in the milk producing duct of the breast, just as Lobular Carcinoma, Invasive Ductal Carcinoma effects the same relative area. In contrast, the Invasive Ductal Carcinoma effects the fatty tissue on the outside of the duct, weakening the surrounding tissue.

An increased form of breast cancer and the third form, is Lobular Carcinoma in situ. It is when cells that look like cancer cells are growing in the milk-producing glands of the breast, but they do not grow through the wall of the lobules. “Women with LCIS have about a 7 to 12 times higher risk of developing invasive cancer in either breast.”

1. **Ways cancer is detected**
2. **Two paragraphs using supporting details from**

A mammogram is relatively new to the cancer research world. The detective device, not even 60 years old, has been concluded to save lives. Mammograms are used to X-ray the entire landscape of both female breast. Many beginning lumps and growths cannot always be detected using an at home method, of self-detection.

 A physician monitors the overall condition of a women. Many women have an obgyn (obstetric and gynecologist), whom specializes in the entirety of health for women. Exams, such as a procedure, where the patient lifts their arm over their head, gently massages the lower, middle, and upper regions of the breast area are effective and free forms of early cancer detection.

1. **Treatment**
2. **Two paragraphs using supporting details from outline.**

In the early 20th century, treatments such as radiation and chemotherapy were introduced to the world. While both treatments hurt before they heal, they are the closest forms of a cure known to humans. Other treatments involve a mastectomy, the removal of, if not all, the infected breast tissue. Some patients may also be prescribed some sort of steroid to internally attack the cancer.

 All forms of treatment for breast cancer are presented to cancer patients, the day of their diagnosis. The treatments are laid out and presented as choices for the patient, while some doctors offer their opinion and expertise. The vast variety of treatments opens many doors to relief and healing. Many treatments move alone with the formal stage of cancer, some patients may go through all forms of treatment as their condition may worsen.

1. **Conclusion**

 As breast cancer itself, increases in numbers of diagnosed women, researchers work endlessly for a break through. The effects of cancer not only effect the patient but follow up with lasting effects on family members and support systems. New innovations in medical technology has opened doors to defective devices such as the machine that performs a mammogram, and the resources used to conduct chemotherapy and radiation. While ethnicities will always affect not only cancer, but available treatments and necessities, opportunities for those with cancer and chances of cancer will continue to broaden. Although no cure is clear, and even treatments maybe serve a narrowed purpose, the researchers and doctors involved in cancer research, remained determined and optimistic, when dealing with the effects of cancer. As studies progress and provide us with new information, we take small, yet large, steps to improving treatments for the cancer. While the number of patients with breast cancer has unfortunately increased, doctors take advantage and observe their patience experience. Breast cancer research has increased the amount of study for all forms of cancer. The possibility of finding improved treatments, for breast cancer, could lead to finding improved treatments, for different forms of cancer. Breast cancer could serve as the stepping stone towards a cure for all cancers.

Summarizes an answer to the research question using supporting details to justify the answer. At least eight sentences to provide a complete argument.

1. **References**

 Ferlay J., Héry C., Autier P., Sankaranarayanan R. (2010) Global Burden of Breast Cancer. In: Li C. (eds) Breast Cancer Epidemiology. Springer, New York, NY

 Ma J., Jemal A. (2013) Breast Cancer Statistics. In: Ahmad A. (eds) Breast Cancer Metastasis and Drug Resistance. Springer, New York, NY

 Siu AL, on behalf of the U.S. Preventive Services Task Force. Screening for Breast Cancer: U.S. Preventive Services Task Force Recommendation Statement. Ann Intern Med. 2016;164:279–296. doi: 10.7326/M15-2886

 Sara Suchy. “A Brief History of Breast Cancer.” HealthCentral, Healthcentral, 15 Oct. 2012, www.healthcentral.com/slideshow/a-brief-history-of-breast-cancer

 Anderson, M. (2010, April 23). Race and ethnicity as cancer risk factors. Retrieved November 16, 2017, from https://www.mdanderson.org/publications/cancerwise/2010/04/race-and-ethnicity-as-cancer-risk-factors.html

 “Treating Breast Cancer.” American Cancer Society, www.cancer.org/cancer/breast-cancer/treatment.html

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