



Welcome to the BCRC-WA February 2013 Newsletter

C/o - Suite 42
146 Mounts Bay Road
Perth, WA, 6000

Prof. Arlene Chan

Director,
Breast Clinical
Trials Unit,

Vice-Chair,
Breast Cancer
Research Centre WA



BCRC-WA research update by
Professor Arlene Chan

As we start another year, I am very pleased to convey to you the many areas of research that are ongoing and about to be initiated soon.

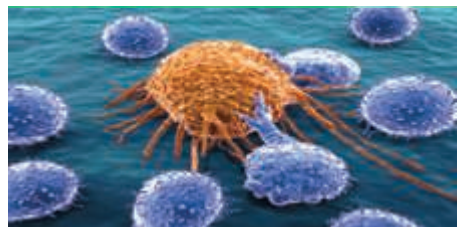
In keeping with our growing understanding that breast cancer is made up of several different sub-types, so the research into various drug therapies are increasingly more focused on the individual sub-types.

We have 6 -7 ongoing trials, which aim to incorporate some of these newer “targeted” drugs in combination with effective chemotherapy or endocrine drugs, in an effort to improve survival. We are very pleased to be able to provide eligible patients access to these clinical trials.

At a local level, we have awarded BCRC-WA grants to three projects –

(i) Measuring physical activity and sedentary time in breast cancer survivors, (ii) Evaluation of side effects of treatment for which patients seek medical intervention and development of a coordinated approach to manage patients between the multidisciplinary specialist team and the general practitioner (iii) Evaluation of the repair capacity of triple negative breast cancer cells, with a view to identifying the effectiveness of standard chemotherapy and provide the basis for future drug development for this type of breast cancer.

I look forward to telling you of the results of some of these research projects in the coming months. However, I hope you share my optimism in seeing how these endeavours and many others will ultimately serve to improve delivery of care and outcomes achieved in breast cancer patients.



Lymphocyte invading cancer cells

Woodside's Subsea and Pipelines team awareness



Every month Woodside's Subsea and Pipelines team hold a community initiative to raise awareness, funds and support for a charity of their choice.

Subsea and Pipeline team members Verica Stojceska and Katie Mills, coordinated the September community initiative to raise awareness for breast cancer.

The Subsea and Pipelines team has firsthand experience with breast cancer. Within the past 12 months, two of their colleagues were diagnosed with breast cancer and several others had personally been affected through loved ones.

In order to raise breast cancer awareness during September, Verica and Katie decorated their office floor with A3 pink posters on breast cancer facts, statistics and inspirational quotations.

A PINK afternoon tea and talent show was held on Friday, September 21 2012 at Woodside's offices. All staff were asked to wear pink to the event which was catered with pink cupcakes and pink drinks. Katie did a short talk about her

experience with breast cancer and the talent show was a success - the winning entry being PINK ELVIS.

Two of the Mount Hospital breast nurses attended the function and gave the team a demonstration on how to conduct a breast check - a special thank you to Cath and Kelly. With the support of their peers, Verica and Katie raised the profile of breast cancer awareness and donated a generous sum towards BCRC-WA.

They also conducted a survey of which 90 people responded, with the following findings:

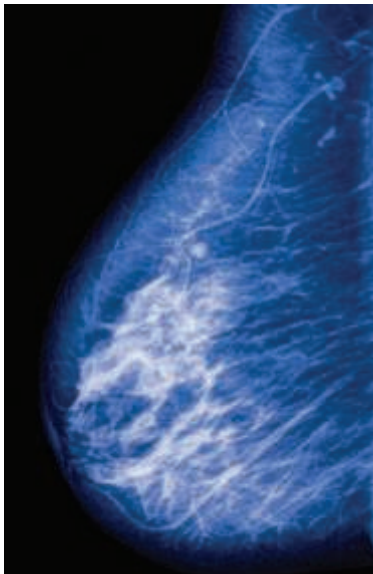
- **Have you been personally affected by breast cancer** - either yourself or an immediate family member? 39% said YES
- **Do you know someone affected by breast cancer?** 82% said YES
- **If you responded yes to Q1 or Q2 - was this person affected within the last 12 months?** 49% said YES
- **Do you know how to perform a self examination for breast cancer?** 50% said NO
- **Do you or your partner (if applicable) have regular breast cancer examinations e.g. via GP at same time as Pap smear?** 52% said YES

Modern surgical treatment of breast cancer

Breast cancer remains one of the most common cancers in women worldwide.

A group of specialists, including radiologists, oncologists, and surgeons, among others, offer a collaborative team approach against the disease, from early diagnosis to surgery, radiation therapy, chemotherapy and other medical treatments. As a result, women are now living longer, healthier lives.

Largely due to the introduction of breast screening programs in developed countries around 30 years ago, the majority of women are nowadays diagnosed with small breast cancers. These are associated with an excellent chance of long-term survival, and are suitable for breast-conserving surgery (BCS).



Xray of the Breast

Traditionally, a simple wide excision has been the main form of BCS, and this aims to remove all cancer with a 1cm margin of normal surrounding breast tissue. But with the improvement in

survival the emphasis has shifted to cosmetic outcomes – better outcomes translating into a lesser psychosocial impact, such as less anxiety and depression, and better body image and self-esteem.

Cosmesis, in turn, depends to a great extent on the volume of breast removed. Simple wide excisions that remove more than 10% of breast volume generally result in unnatural breast shape and appearance.

However, the combination of traditional breast cancer (oncological) surgery with the use of plastic surgery techniques has led to the arrival of the concept of ‘oncoplastic surgery’.

Techniques of oncoplastic surgery have now expanded the scope of BCS, allowing resections of up to 50% of the breast volume in some cases, without compromising the adequacy of the margins of tumour resection while maintaining a satisfactory breast shape.

These techniques rely on the displacement and re-shaping of tissue



Dr Jose Cid-Fernandez

Modern surgical treatment of breast cancer

By Dr Jose Cid– Fernandez

...Continued volume within the breast, and are therefore more suitable for women with medium to large breasts who are willing to undergo a breast reduction, and often symmetrisation surgery in the opposite breast.

Approximately, a remaining one third of women with breast cancer still require a mastectomy, usually due to a large breast cancer size at diagnosis, small breasts, or both.

For these women, immediate reconstruction at the time of mastectomy is becoming more widely available and is associated with clear psychological benefits.

Replacement of the lost breast is usually achieved in a single or multiple steps, either using silicone-filled implants, or importing flaps that carry skin, fat and muscle from the back (*latissimus dorsi flap* or LD flap, often requiring also a breast implant), or from the abdomen (*transverse rectus abdominis myocutaneous flap* or TRAM flap).

In summary, the combination of oncoplastic surgery and breast reconstruction techniques has revolutionised the surgical approach to

breast cancer, allowing improved satisfaction, body image, and quality of life of affected women.

A Brief Summary of Oncoplastic Surgery:

Oncoplastic surgery is tumor specific immediate breast reconstruction. It represents the integration of plastic surgery techniques into breast cancer surgery in order to preserve aesthetical outcomes and quality of life of the patients, without compromising local control of disease. It is based on three surgical principles: ideal breast cancer surgery with free tumour margins, immediate breast reconstruction, and immediate symmetry with the other breast. Although the word was originally coined by Werner Audrescht in Germany in the 1990's, plastic surgery techniques were transposed into breast-conserving therapy to avoid late unsatisfactory aesthetic results in the 1980's France by Jean-Yves Petit (Institut Goustave-Roussy), Jean-Yves Bobin (Centre Leon-Berard) and Michel Abbes (Centre Lassagne).

Breast Cancer Myth #1: All breast cancer patients have the same series of treatment.

(These facts updates have been kindly compiled by some of our PYNKS group)

There are many different types and grades of breast cancer, which are generally distinguished by pathology testing of tissue following surgery. In addition, diagnosis can occur at different stages. These factors result in a wide range of different treatments. Different patients respond differently to treatments, so the sequence of treatment ends up being quite tailored to the individual. One person's treatment experience is very unlikely to be the same as another friend, relative or colleague.

The role of diet in the care of women with breast cancer, undergoing chemotherapy

Many women faced with a diagnosis of breast cancer will begin to question their diet and lifestyle: Have I been eating the wrong foods? Should I be taking supplements? Is a low sugar diet going to reduce the cancer progression? This article will clarify some what are the diet and nutrition goals for breast cancer patients undergoing chemotherapy.

Once you are diagnosed, having a healthy diet may help you get through your treatment better. If your treatment involves chemotherapy, you may experience symptoms which affect your ability to take in adequate nutrients so the nutrition goals during chemotherapy are: *to avoid large changes in weight* (whether drastic weight loss or weight gain), *and take in adequate nutrients preferably through food or, if needed, liquid nutrition supplements.*

It is not a time for “crash dieting”. Removing whole food groups from your diet or overloading your diet with one particular food or fluid (i.e pomegranate) may affect your nutritional status.

Research shows that breast cancer patients do lose lean muscle mass during their chemotherapy treatment.¹ This may be as a result of changes in diet and exercise patterns during their treatment. Losing too much lean muscle mass may affect your function and overall quality of life during treatment. If you are losing weight consistently, increasing your protein intake may be beneficial.

This means including a source of protein rich foods at each meal. For example, lean animal proteins (i.e beef, chicken and fish; low fat milk, yoghurt or cheese or eggs and baked beans). In some cases, liquid nutritional drinks such as Ensure Hospital Powder™ may help you achieve adequate protein intake.



Angela D'Amore
Senior Dietitian

There are many “myths” that you might read regarding what to eat and what not to eat when you have breast cancer, however these are usually not backed by evidence and sometimes unsafe. For example, reducing intake of animal foods may encourage lean muscle loss.

Approximately, 27% of breast cancer patients see naturopaths and 43% take mega doses of vitamins². Some of these practices may affect your treatment negatively so check with your oncologist or dietitian when commencing any new diet or vitamin therapies and advise them if you are taking naturopathic supplements.

¹ The Cancer Council NSW

² Clinical Practice Guidelines for the Management of Advanced Breast Cancer, NHMRC

Pynks

Positive, Young Nurturing, Kids/family focused, Strength Giving

**Do you have secondary cancer?
Like to talk to like minded people who
really understand?**



Pynks is a support & information sharing group for younger women and those who are young at heart with facts, research & trials group for advanced secondary breast cancer.

**Telephone: 9321 2354 | Email: kathy@bcrc-wa.com.au
www.bcrc-wa.com.au**



Health educational talk to patients with secondary breast cancer

Tony Brideson from Definitive Health gave an educational talk to a group of ladies who have secondary breast cancer.

Secondary or metastatic cancer is when the cancer has spread from the primary site where the cancer started to other areas of the body. The PYNKS group meet bimonthly and provide a support and educational information sharing group for younger women and those young at heart with metastatic breast cancer.

The focus of the group is educational and informative, hosting information on the latest research trials, health and dietary requirements as well as some general leisure relaxation and craft activities. Speakers are chosen at the groups request.

Tony is an exercise physiologist and CHEK practitioner. Tony mentioned that some people have commented on chemotherapy sessions interrupting a person's general fitness and exercise activities. This is to be expected. Emphasis during chemotherapy is on general exercise that does not stress the body and encourages activation of the parasympathetic nervous system, the system that encourages healing, rebuilding and repair. Activities that do this would be gentle exercises such as slow walking, Tai Chi and Qi Gong, meditation and breathing exercises, anything that could be done without 'working up a sweat'. The main aim here is to calm the body down and listen to

how it feels. Tony suggested that women's intuition is a sense not to be ignored.

Plenty of water in the summer months (in fact all year round) is beneficial, and he advises 30ml per kilo of bodyweight as a bare minimum from a good quality filtered source.

Some symptoms people may experience when undergoing chemotherapy are the queezy nauseous sensations. A smoothie may assist with energy, to increase protein intake and soothe the stomach which would go a long way to helping you at this time.

One of the ladies that attended the PYNKS meeting commented, "Tony from Definitive Health has a great understanding of eating and fitness and was great at explaining specific information (about diet and fitness) that was useful to metastatic breast cancer."

SMOOTHIE RECIPE

Greek or natural yoghurt
Berries of your choice or banana
1 tablespoon coconut oil (or substitute with flax seed, linseed or cod liver oil)
1 tablespoon honey
1 raw egg

Add ingredients above with a couple of ice blocks and blend.



A special recognition to the Hudson's coffee shop who have generously donated catering and coffee's at out PYNKS meetings as well as other various BCRC-WA functions.

BCRC-WA Oct breast awareness morning tea

Breast Cancer Research Centre—WA (BCRC-WA) held a October Breast Awareness Morning Tea for breast cancer patients at the Mount Hospital.

Catering was kindly donated by Flavia Alves of the cupcake catering company, Sugarplum Sweets.

It was great to see many people support the cause by sharing a cuppa and cupcake together.



Judy Marriott, Pam Wilson and Border Collie Gemma

We are delighted with the recipe given to us by Judy Marriott and Pam Wilson.

Please see Judy and Pam's recipe 'Ling Fish and Garden Salad with Sweet Chilli Sauce' featuring on the right hand side of this page.

Ling fish and garden salad with sweet chilli sauce

Ingredients:

Ling Fish Fillets

Breadcrumbs

Egg

Flour

Coat fish in flour, egg and breadcrumbs, set aside in fridge.

Garden salad

Lettuce (mixed packet)

Tomato diced, seeds removed

Cucumber diced

Carrot Julienne (cut up in very thin strips)

Beetroot Julienne

Gherkin (diced)

Olives

(You can use any type of salad vegetable and any amount)

Arrange lettuce mix on a long serving plate and mix in diced vegetables.

Gently fry crumbed fish in a little olive oil until golden.

Arrange fish on the garden salad and drizzle with sweet chilli sauce and serve immediately.



Smocking group extends hand in support



From left, Kay Neil, Bon Carter, Pam Seligmann, Ann Hendricks, Jenny Shapcott and Mary Fazio Extract courtesy the Post Community News October 2012 (picture and written article below).

Special smocked dresses are being created by a group of women raising money for breast cancer research.

Breast cancer survivor Pam Seligmann said she had been smocking for 15 years and found that an episode of breast cancer brought a surprising improvement in her dressmaking skill.

“I turned my attention to raising money for breast cancer research,” Pam said.

“I felt there was an opportunity to gather together people who enjoyed the art of smocking and who were also willing to put their efforts towards an excellent cause”.

The smockers donate the fabrics, trim, cotton and of course, their labour, so that all money goes to their worthy cause.

“Doting grandmas are very often our customers with some of our dresses going to the eastern states and even the UK”, Pam said.

To contact Pam about joining the group or buying a smocked dress, call 0402 818 521

For more information on the Breast Cancer Research Centre – WA please see our website <http://bcrc-wa.com.au> or email Kathy@bcrc-wa.com.au

Many thanks...

The Cottesloe Golf Club ladies held a golf day and kindly donated a significant contribution to BCRC-WA. They have for many consecutive years now run this annual event. Julie Hargreaves from “Look Good, Feel Better” also held a pamper day where ladies could receive a relaxing facial. Breast Cancer Research Centre – WA (BCRC-WA) would like to express our gratitude to all those and many that have assisted in the past and present and may or may not be mentioned directly in these columns. Your support is greatly appreciated.

Kelmscott tennis club high tea and educational breast cancer research talk

The Kelmscott Tennis Club recently held a High Tea Fundraising Event. The tennis club hall was full of scrumptious high tea delicacies, elegant tea cups and people with much enthusiasm to enjoy the occasion.

Lesley Choules kindly co-ordinated the planning of the day with the many volunteers. All the visitors enjoyed a lovely time together.

Professor Arlene Chan spoke to a full audience on the topics of where Breast Cancer Research Centre—WA is making great progress in improving the quality of peoples lives, who have breast cancer.

Through research trials there are many ongoing advances which further increase the success of recovering from breast cancer.

Hearing the most up to date news on breast cancer research and the progress and improvements that are made to assist people in recovering from breast cancer provides a lot of support and motivation to those that need it. For further information on Breast Cancer Research Trials go to the BCRC-WA website. BCRC-WA would like to thank all those that kindly participated on the day, for such an enjoyable community event aswell as a significant donation to BCRC-WA Research.



Lesley Choules, Prof Chan and Adrian Choules



Prof Chan talks to a full audience



Breast cancer is one of the most common cancers in women, with over 12,500 cases diagnosed in Australia each year.

In Western Australia, approximately 1,100 women will be newly diagnosed with breast cancer each year.

As a result of the national screening program and greater community awareness of the need to present with breast symptoms, the vast majority of women are usually diagnosed with early stage cancer, which is potentially curable.

In addition, there is a large body of scientific evidence that demonstrates survival is improved when appropriate use of drug therapy is given, following breast surgery.

To achieve higher cure rates and enable treatments to be given with fewer side effects, it has been essential that high quality

clinical research be undertaken with breast cancer patients, as well as in the laboratory. BCRC-WA was formally established for the purpose of consolidating the breast cancer expertise already in existence within the Mount Breast Group, to provide greater organisational structure to the conduct of clinical trials and encourage local research endeavours which focus on improving patient centred care.

We also provide patient support groups and educational activities. The purpose of educational activities are to educate patients when their breast cancer is first diagnosed regarding their treatments. Your support will be used to enable these aims.

For further information about Breast Cancer Research Centre—WA (BCRC-WA) please see our website <http://bcrc-wa.com.au> or phone Kathy on 9321 2354.

