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Symptom management of Breast cancer

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Short Commentry

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ABSTRACT

Breast cancer is the most common cancer in women in the United States and Europe. The treatments related to breast cancer produces many side effects, which are become health hazardous. Many of the cancer treatment result in large quantity of side effects occur in up to 90% of patients during treatment and can strive for months or years after treatment has come to an end. As the number of breast cancer survivors regularly increases, the need for controlling the side effects after the treatment should also grow.

Comprehensive geriatrics assessment (CGA) is a practioning tool for geriatricians and perform appropriate morphology of senior patients into independent and frail patients. Many of the reviews have evoluted the use of CGA in aged breast cancer patients but many of the studies need to be compared in the elderly breast cancer patients. CGA is an evident tool to stratify patients into healthy independent and decrepit patients. It gives a vision on prominent treatment and added chemotherapy options in this population. Comprehensive geriatrics assessment has been integrated as a screening and follow up tool for senior patients.

BREAST CANCER OVERVIEW

Breast **cancer** is the leading reason for death in western women. The first sign of breast cancer is a breast lump or thickening of breast tissue. Carcinoma stages vary from early, curable breast cancer to pathologic breast cancer, with a range of breast cancer treatments. Male breast cancer is not uncommon but must be considered as serious. Chemotherapy, typically attributed with **radiation therapy** and **surgery**, is enforced to number of cancer patients. However, most toxic anticancer agents in present use have very little or no specificity for tumor cells and target each and every growth of healthy proliferating cells, leading to an undesirable adverse effects like nausea, vomiting, myelosuppression and even thrombocytopenia [1-4].

The frequent development of multi-drug resistance by cancer cells is one of the factor that obstruct conventional **chemotherapy**, where there is a requirement to develop new approaches for cancer therapy that significantly targets tumor cells, with raising effects on all alternative cells, so eliminating side effects, and avoiding the problem of drug resistance. A therapy has been evolved in bound cationic

antimicrobial peptides (AMPs), that are shown to determinally destroy cancer cells [5-7].Breast cancer risk factors may be classified as un modified risks, with age, ethnicity, family history, and age at menance and compliant risk factors, including diet, alcohol consumption, overweight, smoking and physical [8-11].

In recent years, Breast cancer is one of the most common cancers in females, Population-based studies have found that there is a chance in young age as an independent predictor of adverse breast cancer–specific outcome [12-17].

It has been advised that the average starting tumor size at presentation is more in women ≤ 35 years but in the present series and others, this was not the case. Another eminent author found that there is no constraining difference between very young and young women, or any difference between all young women taken together (≤ 35 years) and a large cohort of older women (36-65 years)[18-20].Advised, there was a steady in increase mean tumor size with increasing age within the group of older women (P=0.0108) [10, 21-25].

CONCLUSION

The care for the young women with breast cancer has been the recent focus with advances in diagnosis, treatment, and survivorship. The variations in epidemiology and management choices, is the distinctive issues surrounding fertility, sexuality, and pregnancy, the various approaches to treat the women frequently may also develop various other areas of expertise. Breast cancer prevalence continues to increase specially in senior patients. Comprehensive geriatrics assessment has been favored as a screening and push up tool for senior patients, CGA may help stratify patients who may develop adverse reactions to treatment strategies.

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