





EDITORIAL

Early detection of breast cancer - "Indian Solution to an Indian problem"

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Introduction & Facts

More than one million women worldwide are newly diagnosed with breast cancer annually. Worldwide, a woman dies of Breast cancer every minute. In India, well over 140,000 women are newly diagnosed with breast cancer every year, a staggering number that has overtaken cervical cancer to become the leading cause for cancer related mortality among women in metropolitan cities. This is only the tip of the iceberg. as many breast cancers are not reported to the Cancer Registry & many States do not have a robust Cancer Registry. In a striking contrast to the western world where most breast cancers are diagnosed over the age of 50, more than 50% of breast cancers in India are diagnosed between the ages of 25-50. Some 70, 000 women in India succumb to breast cancer annually. Although the number of women diagnosed with breast cancer is much more in other large countries like USA & China, the actual number of deaths from this illness is the highest in India.

According to World Health Organization (WHO) statistics, more than half of the global cancer burden is found in underdeveloped and developing countries. The overall burden of cancer cases is shifting substantially to vulnerable populations in ill-prepared & resource constrained developing countries. Developing countries have access to only 5% of global spending on cancer. India currently spends only 1.2 per cent of its GDP on publicly funded health care. This is considerably less than most other comparable countries.

More than 60% of breast cancers in India present in the advanced stage and hence death rate from breast cancer is also very high. Lack of awareness

& absence of an organized National Breast cancer screening programme are the main reasons accounting for late presentation. Although breast cancers are managed by Surgical Oncologists, both benign and malignant breast disease in India is largely managed by General Surgeons. There is very little effort directed at empowering people about the importance of early detection of breast cancer & counselling patients is not considered to be an important component of breast cancer care. Whilst few Cancer Centres offer care on par with the best Centres across the world, by and large, cancer care in India is a 'lottery' - with some getting excellent care, whilst most not. That there is huge variation in the survival of patients with breast cancer across the country is an understatement.

Although introduction of an organized population based Breast Screening Programme using Mammography is the best proven way of detecting cancer early, it is not a viable option for mass screening in India due to the enormous costs involved, huge variation in Mammographic reporting & issues relating to quality assurance. Moreover, more than 87% of India's population is under the age of 50 years, where screening by way of mammography is not effective at detecting early impalpable breast cancer (sensitivity of mammography is best over the age of 40 years).

Finding 'Indian solution to an Indian problem' - Implementation of Andhra Pradesh's FIRST population based Breast Cancer Screening Programme

With a mission to detect breast cancer in the early stages & save more lives, Ushalakshmi Breast Cancer Foundation (UBF) & KIMS-USHALAKSHMI Centre for Breast Diseases (Indian subcontinent's FIRST free standing purpose built comprehensive Breast Centre located in Krishna Institute of Medical Sciences - KIMS) has partnered with the Govt. of Andhra Pradesh at implementing Andhra Pradesh's FIRST innovative, cost effective population based Breast Cancer Screening Programme. 950 Community based Health Care Workers (ANMs and Community Resource Persons- CRPs) in Hyderabad District were trained to perform Clinical breast examination (CBE), a screening tool to detect early breast cancer in September 2012. They were also educated through established and well researched audio visual aids about the importance of breast awareness & early signs of breast cancer. Some 28,437 underprivileged women in Hyderabad District underwent breast cancer screening between October 2012 - September 2013. Women diagnosed with breast cancers through



Figure 1: Health Care workers along with Trainers at the launch of Andhra Pradesh's FIRST population based Breast Cancer Screening Programme (2012).

this initiative were treated free of cost through the Rajiv Arogyasree Scheme.

Clinical breast examination (CBE), where trained Healthcare workers examine the breasts of women is relatively simple and inexpensive. Equally, there is considerable circumstantial evidence to show that CBE may be a viable option for a country like India. In addition to empowering underprivileged women about importance of early detection, the above mentioned Breast Cancer Screening Programme has a potential to reduce mortality from this disease. There is already an ongoing large randomized controlled trial in Mumbai to address this issue. Encouraged by the success of the pilot project in Hyderabad District, UBF & KIMS-USHALAKSHMI Centre for Breast Diseases has now embarked upon implementing a similar community based Breast Cancer Screening Programme reaching out to some 1, 20, 000 underprivileged women between the ages of 35-65 years in 16 Districts of Telangana & Andhra Pradesh over a two year period (2014-2016).

Conclusion

Breast cancer is still a 'closet' issue in most parts of rural India. Creating awareness and implementing organised population based Breast Cancer Screening Programme are the two effective ways at detecting breast cancer in the early stages, which translates to improved survival. In an effort to find 'Índian solution to an Indian problem', UBF and KIMS-USHALAKSHMI Centre for Breast Diseases has established a benchmark by carefully designing and successfully implementing a population based Breast Cancer Screening Programme in Telangana and Andhra Pradesh. The Government of India must consider early detection of breast cancer as a national priority & there is an urgent need for similar coordinated pubic private partnerships to be implemented across the country in our combined fight against breast cancer.