



Patient Diagnosis Resource for INVASIVE DUCTAL CARCINOMA (Breast Cancer)

Your Diagnosis

Your doctor has determined that you have invasive ductal carcinoma (IDC), the most common type of invasive breast cancer, accounting for between 70–80% of all cases.

The risk of developing IDC increases after age 45, with two-thirds of cases occurring after the age of 55. Only 20–30% of patients have a family history of the disease.

About the Condition

The breast is comprised of 2 main types of tissue — glandular and supportive. The glandular portion includes the lobules, which produce milk in women who are breastfeeding, and the ducts, which carry milk from the lobules to the nipple. The supportive portion includes the fibrous connective tissue and fatty tissue that determine the size and shape of the breast. Any of the tissues of the breast can experience symptom-causing changes, which may be either benign or cancerous.

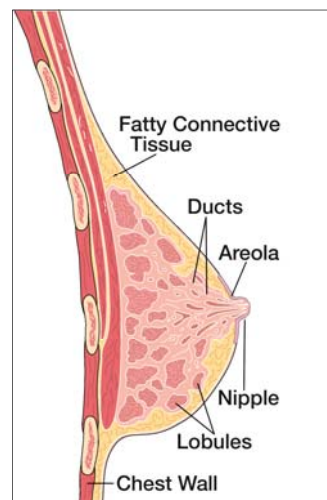
Invasive ductal carcinoma occurs when cancerous, or malignant, cells form in a milk duct and spread outside the duct into nearby breast tissue forming a lump, or tumor. The cancerous cells may further invade and damage surrounding areas such as the lymph nodes or spread to other locations in the body (metastasize).

Your doctor may want to perform one or more tests to help determine if the cancer has spread, which could include:

- ◆ MRI Scan
- ◆ CT Scan
- ◆ Lymph Node Biopsy
- ◆ X-ray
- ◆ Bone Scan
- ◆ PET Scan

Cancer that is confined within the breast is the most manageable and curable. If malignant cells extend into the lymph nodes and beyond to other areas of the body like the bones or lungs, the treatment plan will be more complex and the cancer will be more difficult to manage.

Those cases of more advanced breast cancer are referred to as metastatic breast cancer. Be sure to talk with your doctor about your specific stage of cancer.



Treatment Options

Deciding on a treatment plan for your breast cancer can be complex and depend upon a variety of factors such as your age, general health condition, stage of cancer and personal preferences. Sometimes more than one type of therapy may be used. The following treatment possibilities are available:

Lumpectomy – A lumpectomy is breast-conserving surgery that removes only the tumor and a surrounding area of normal tissue.

Mastectomy – Mastectomy, or surgery to remove the breast, may be performed with or without reconstructive surgery. The most commonly used procedure for IDC cases is modified radical mastectomy, which removes the entire breast and some of the axillary (underarm) lymph nodes. Patients considering breast reconstruction should consult with a plastic surgeon who is an expert in the procedure before having a mastectomy.

Radiation Therapy – Lumpectomy is usually followed by radiation therapy, which can be delivered externally or internally. In external beam radiation, a high energy X-ray machine is used to direct radiation at the tumor. Internal radiation therapy uses small radioactive implants placed directly into the breast.

Hormone Therapy – Hormone therapy is only recommended for women whose cancer cells have certain hormone receptors as determined by laboratory testing. It helps cancer shrink and grow more slowly by keeping the malignant cells from exposure to certain hormones such as estrogen and progesterone. Methods used include drugs such as tamoxifen to block the production and effect of the hormones and the removal of the ovaries, the main site of estrogen production.

Chemotherapy – The use of anti-cancer drugs, or chemotherapy, provides a way to slow tumor growth and reduce pain for patients whose cancer has spread. Chemotherapy can work in one of two ways: by keeping the cancer cells from multiplying or by causing the cancer cells to die.

Targeted Therapy – This newest form of anti-cancer therapy targets specific abnormalities within just the cancer cells to slow or stop their growth. The drug trastuzumab (Herceptin) is the best known type of targeted therapy. It is used specifically in cases of breast cancer where the tumor has been shown in laboratory testing to have too much of the protein called HER-2/neu.

You may also consider participating in clinical trials. These investigative studies help doctors learn about new treatments and better ways to use established treatments. Talk with your doctor about the possibility of taking part in a clinical trial in your area.

What You Can Do

You can choose to take an active role in your health and well-being. Learn as much as you can about your condition and have a list of questions ready each time you meet with your doctor. Join a cancer support group, and talk with your family, friends, clergy person or counselor as you feel comfortable. Also, be sure to get enough sleep every night.

Other steps you can take to maximize your health include eating a low-fat diet high in fruits and vegetables, avoiding the use of tobacco, limiting consumption of alcohol and red meat, taking part in some form of exercise and maintaining a healthy body weight.

Additional Resources

American Cancer Society, 800.227.2345, www.cancer.org

National Cancer Institute, 800.422.6237, www.cancer.gov

Susan G. Komen Breast Cancer Foundation, 800.462.9273, www.komen.org

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